

Fill in *all blanks*  
& send to Central  
Office *immediately*

# Butts County Schools Report of Employee Accident

*For Central Office  
Use Only*  
Emp. Date: \_\_\_\_\_  
Daily Rate: \_\_\_\_\_

Full Name: \_\_\_\_\_ Address: \_\_\_\_\_

City/State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

School: \_\_\_\_\_

Time Workday Begins: \_\_\_\_\_ a.m. p.m. (circle one) Hours worked per day: \_\_\_\_\_

Date of Accident: \_\_\_\_\_ Time of Accident \_\_\_\_\_ a.m. p.m. (circle one)

Description of Accident (*include which body part injured and whether left or right side*): \_\_\_\_\_

Initial Treatment: \_\_\_\_\_

Treating Physician (must be from approved Workers' Compensation Physician Panel): \_\_\_\_\_

*(Employee must present **Physicians Authorization to Treat** form to panel physician at time of treatment and if the physician writes a prescription you must get a **Preferred Medical Network Card from central office** to present to the pharmacist before you can get your prescription filled)*

Hospital (if applicable): \_\_\_\_\_

**If the employee chooses not to seek medical treatment at the time of injury, he/she must complete the *Refusal of Medical Treatment* form.**

**If the employee chooses to seek medical treatment at a later date, he/she must obtain a *Physicians Authorization to Treat* form to present to the panel physician at the time of treatment.**

***I understand that in order for Workers' Compensation to cover the cost of my injury, I must choose one of the approved Workers' Compensation Physicians listed below. I also understand that if I choose not to be treated by one of the approved Workers' Compensation Physicians, I will be responsible for payment.***

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Workers' Compensation Physician Panel

**Dr. Shashi Madan**  
135 N. Oak St.  
Jackson, GA 30233  
770-775-7675

**Family Medical Center**  
1657 North Expressway  
Griffin GA 30223  
770-228-2641

**Georgia Ophthalmologist**  
860 W. 3<sup>rd</sup> St  
Jackson GA 30233  
770-775-1234

**Eagles Landing Family Practice**  
1502 W. Third St.  
Jackson, GA 30233  
678-774-0430

**Caduceus Occupational Medicine**  
414 Hwy 155 South #15  
McDonough GA 30253  
678-902-0477

**Venture Medical Associates**  
3334 GA 155-S  
Locust Grove GA 30248  
770-305-7929

**Dr. Carl J. Sutton, III**  
**Sutton Orthopedics & Sports Medicine, P.C.**  
145 Medical Blvd.  
Stockbridge, GA 30281  
770-389-8386

**Piedmont Orthopaedics by  
OrthoAtlanta**  
1240 Eagles Landing Parkway  
Suite 300  
Stockbridge GA. 30281  
770-506-4350

3/20/2020