

INJURY ON DUTY PROCESSING
 MEDICAL SECTION/HUMAN RESOURCES DIVISION
 CHICAGO POLICE DEPARTMENT

DATE

I.O.D. CASE NO.

TO: COMMANDING OFFICER

UNIT

FROM: MEDICAL SECTION

SUBJECT: INJURY ON DUTY

NAME OF INJURED OFFICER

DATE

TIME

THE SUBJECT INJURY ON DUTY CLAIM IS NOT BEING PROCESSED FOR THE FOLLOWING REASON(S):

- 1. INJURY ON DUTY REPORT FORM INCOMPLETE (SEE COMMENTS).
- 2. INCORRECT R.D. NO. _____ (SUBMIT CORRECT R.D. NO. AND COPY OF CASE REPORT).
- 3. R.D. NO. NOT FURNISHED ON THE INJURY ON DUTY REPORT, SUBMIT COPY OF CASE REPORT.
- 4. C.B. NO. NOT FURNISHED ON THE INJURY ON DUTY REPORT; SUBMIT COPY OF ARREST REPORT.
- 5. THE SUBJECT OFFICER IS NOT LISTED AS BEING INJURED UNDER R.D. NO. _____ PLEASE HAVE A SUPPLEMENTARY REPORT PREPARED DESCRIBING THE CIRCUMSTANCES SURROUNDING THE INJURY AND FORWARD ONE COPY TO THE INJURED ON DUTY UNIT.
- 6. THE SUBJECT OFFICER IS NOT LISTED AS BEING INJURED ON THE ARREST REPORT. PLEASE HAVE HIM SUBMIT A TO-FROM-SUBJECT REPORT DESCRIBING THE CIRCUMSTANCES SURROUNDING THE INJURY.
- 7. PLEASE HAVE THE WITNESS _____ SUBMIT A TO-FROM-SUBJECT REPORT.
- 8. PLEASE FORWARD A COPY OF THE RELATED COOK COUNTY ANIMAL & RABIES CONTROL ANIMAL BITE REPORT (GREEN CARD) TO THE INJURED ON DUTY UNIT.
- 9. PLEASE FORWARD A COPY OF THE SUPERVISOR'S MANAGEMENT LOG (CPD-11.455) TO THE INJURED ON DUTY UNIT.
- 10. PLEASE FORWARD A COPY OF THE HOSPITAL EMERGENCY ROOM REPORT.
- 11. PLEASE HAVE THE ATTACHED NOTIFICATION OF LEGAL ACTION TO RECOVER DAMAGES (CPD-62.388) COMPLETED, SIGNED, APPROVED, AND FORWARDED TO THE INJURED ON DUTY UNIT.
- 12. IF THE INCIDENT IS RECORDED ON A MISCELLANEOUS INCIDENT EXCEPTION REPORT (CPD-11.419), PLEASE FORWARD A COPY OF THE CARD.

COMMENTS

DEPARTMENT DIRECTIVE STATES: UNIT COMMANDERS OF EXEMPT RANK WILL BE RESPONSIBLE FOR ENSURING THAT ANY ADDITIONAL REPORTS REQUIRED BY THE MEDICAL SECTION ARE PREPARED AND FORWARDED WITHOUT DELAY.

PLEASE REPLY BY:

MEDICAL SECTION