

TRANSITIONAL DUTY PROGRAM AGREEMENT



Human Resources

When possible, OSU provides a transitional duty assignment (TDA) for employees who have sustained work-related injuries. This program allows the employee to return to work for a specific time period with duties that facilitate a complete return to regular duty. University Human Resources provides a liaison who will work with the employee and the supervisor to facilitate ongoing review. Completed agreement needs to be sent to workerscomp@okstate.edu, ohsp@okstate.edu and nol@choosebroadsfire.com.

The Unit/Supervisor Agrees to:

- Review the physician’s restrictions with the employee prior to or upon his/her return to work. Discussions may include University Human Resources, the employee and the department/supervisor.
- Provide work that falls within the work restrictions provided by the physician.
- Provide a safe work environment. The department agrees to continually monitor the work being performed and the environment the employee is working in to ensure conditions are safe and remain within the restrictions noted by the physician.
- Continual review of work restrictions and physician updates to determine if modifications are needed and the cumulative duration of the TDA(s) does not exceed 60 work days due to the injury/illness.

The Employee Agrees to:

- Abide by the restrictions given by the treating physician and this Agreement.
- Provide medical certification and any other documentation as needed by the University.
- Work with and cooperate with the University Human Resources liaison and his/her supervisor in matters relating to the return to work program.
- Inform the supervisor and the University Human Resources liaison of any change in the medical condition immediately and provide medical documentation to support the change.
- Bring to the attention of the supervisor any concern for work assignments that may cause further injury or may exceed the physician’s restrictions.
- Recognize that these restrictions are temporary and are not considered permanent duty. Agree there is a maximum of 60 work days in this program.
- Understand that exceeding restrictions as agreed to in this Agreement and pursuant to those outlined by the treating physician is a safety violation. The employee will not perform any activities that would violate restrictions placed by the physician.

RTW Restrictions: _____ **Follow-up Dr. Appt:** _____

Temporary Duties: _____

RTW Date: _____ **End of Agreement Date:** _____ **# TDA Work Days :** _____

Employee Signature: _____ **Date:** _____

Unit/Supervisor Signature: _____ **Date:** _____

HR Liaison Signature: _____ **Date:** _____