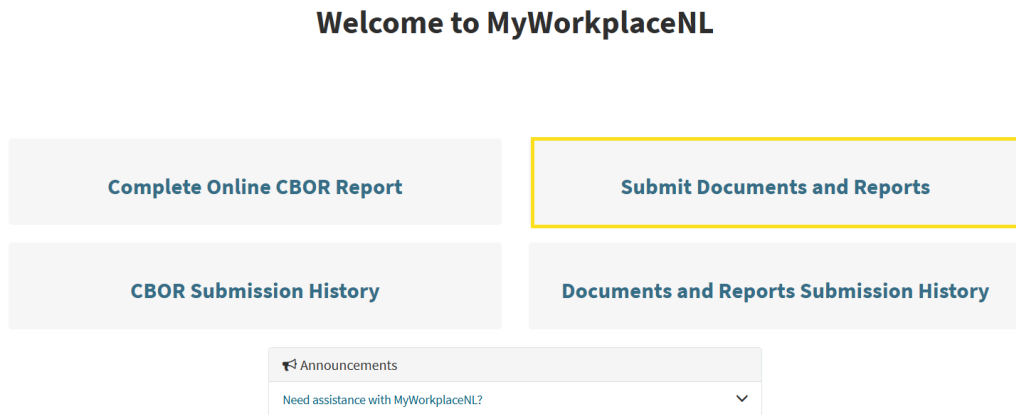
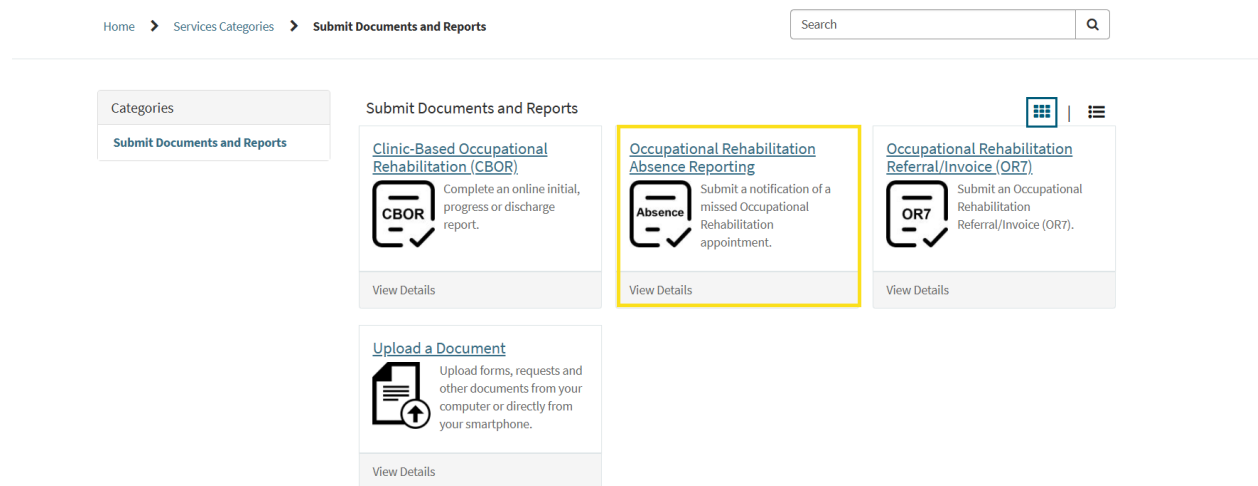


Submitting an Occupational Rehabilitation Absence Reporting Form

To submit an Occupational Rehabilitation Absence Reporting Form, log in to MyWorkplaceNL and select **Submit Documents and Reports** from the landing page.




Select **Occupational Rehabilitation Absence Reporting**.



To begin, complete the **Client Information** section.

Occupational Rehabilitation Absence Reporting

Submit a notification of a missed Occupational Rehabilitation appointment.



When an Injured Worker has missed one (1) Occupational Rehabilitation appointment, the Contractor must notify WorkplaceNL within one (1) business day.

To obtain your submission confirmation number, please go to your Documents and Requests Submission History.

Submit

Required information

First nameLast nameClaim number

Date of missed appointment

Type of appointment missed

* Indicates required

Client Information

* First name

* Last name

* Claim number

* Date of missed appointment

* Type of appointment missed

-- None --

Vendor Information

* Clinic name

* Vendor number

* Practitioner name

* Treatment site

* Reason for missing the appointment

-- None --

To add the **Type of appointment missed**, select from the drop-down menu.

* Type of appointment missed

-- None --

-- None --

Worksite Occupational Rehabilitation

Clinic Based Occupational Rehabilitation

Psychosocial Risk Factors Intervention (PRFI)

Functional Assessment

Adjudication Assessment

Work Station Review

Job Site Analysis

Other Services

WorkplaceNL

2

If **Other Services** is selected, you will be prompted to provide details.

* Type of appointment missed


Other Services

* Please provide details

Next, complete the **Vendor Information** section.

Occupational Rehabilitation Absence Reporting

Submit a notification of a missed Occupational Rehabilitation appointment.



When an Injured Worker has missed one (1) Occupational Rehabilitation appointment, the Contractor must notify WorkplaceNL within one (1) business day.

To obtain your submission confirmation number, please go to your Documents and Requests Submission History.

* Indicates required

Client Information

* First name

* Last name

* Claim number

* Date of missed appointment

YYYY-MM-DD

* Type of appointment missed

-- None --

Vendor Information

* Clinic name

* Vendor number

* Practitioner name

* Treatment site

* Reason for missing the appointment

-- None --

Submit

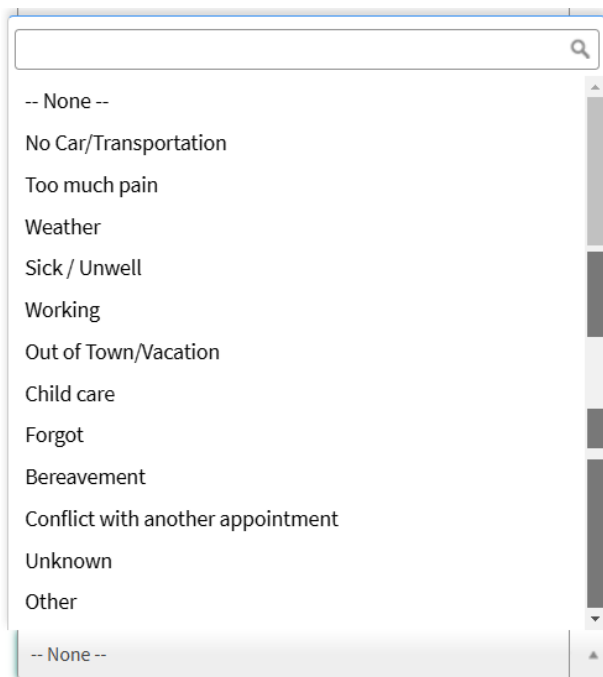
Required information

First nameLast nameClaim number

Date of missed appointment

Type of appointment missed

To add **Reason for missing the appointment**, select from the drop-down menu.



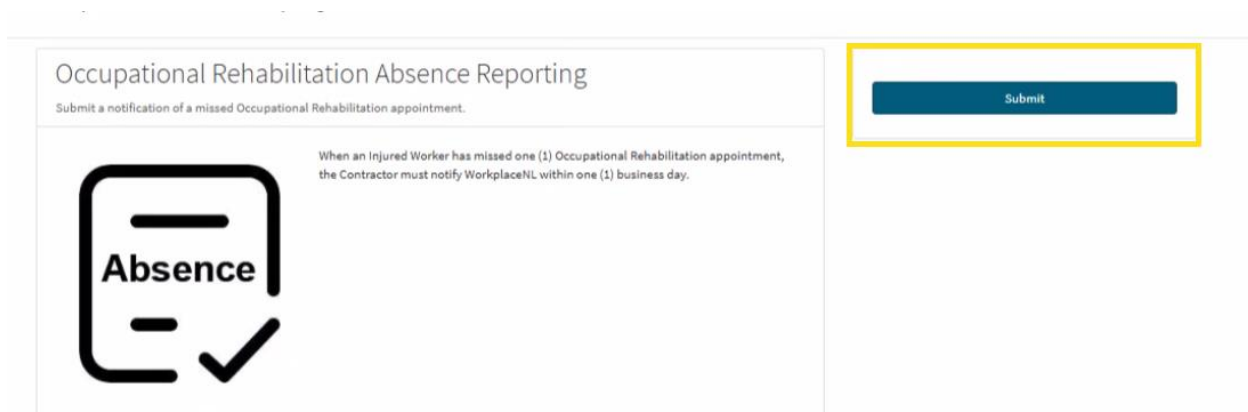
A screenshot of a web-based drop-down menu. The menu is open, showing a list of options. At the top is a search bar with a magnifying glass icon. The list of options includes: "-- None --", "No Car/Transportation", "Too much pain", "Weather", "Sick / Unwell", "Working", "Out of Town/Vacation", "Child care", "Forgot", "Bereavement", "Conflict with another appointment", "Unknown", "Other", and "-- None --" at the bottom. A vertical scrollbar is visible on the right side of the list.

If **Other** is selected, you will be prompted to provide details.



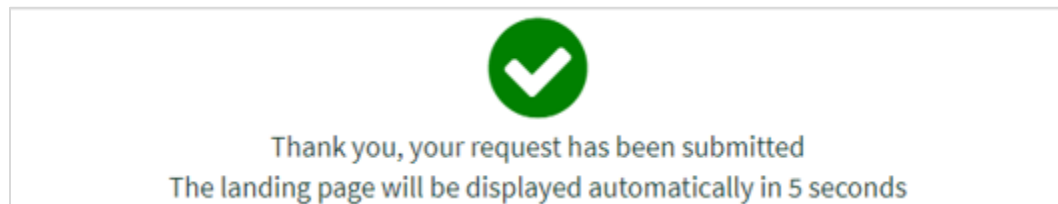
A screenshot of a form with two main sections. The first section is labeled "* Reason for missing the appointment" and contains a dropdown menu with "Other" selected. The second section is labeled "* Please provide details" and contains a large, empty text input box.

Once all information is entered, click **Submit**.

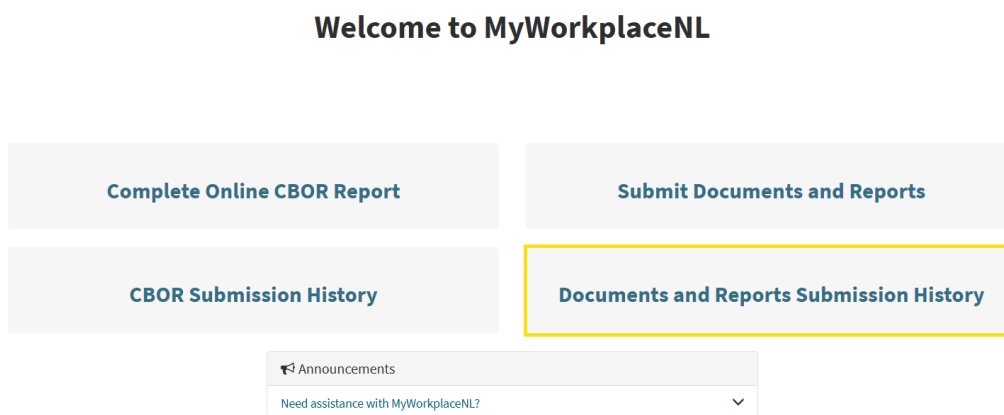


A screenshot of the "Occupational Rehabilitation Absence Reporting" form. The form has a title "Occupational Rehabilitation Absence Reporting" and a subtitle "Submit a notification of a missed Occupational Rehabilitation appointment." Below the subtitle is a large icon of a document with a checkmark and the word "Absence". To the right of the icon is a text box that reads: "When an Injured Worker has missed one (1) Occupational Rehabilitation appointment, the Contractor must notify WorkplaceNL within one (1) business day." At the bottom right of the form is a blue "Submit" button, which is highlighted by a yellow rectangular box.

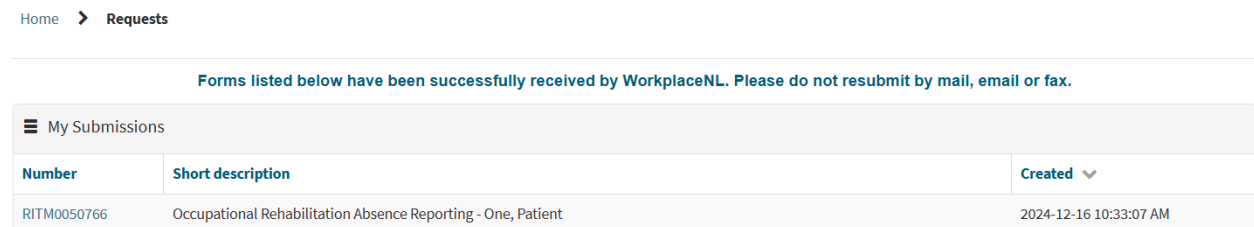
Upon submission, a confirmation screen will display and you are then redirected to the landing page.



You can view a list of all submitted forms to WorkplaceNL, including the Occupational Rehabilitation Reporting Form by selecting **Documents and Reports Submission History** on the landing page.



A list of documents successfully submitted to WorkplaceNL will display and include reference information about the submitted document.



If you have questions or require assistance with submitting an Occupational Rehabilitation Absence Reporting Form, contact us by calling 1.800.563.9000, or email us at info@workplacenl.ca