

## Workers Compensation Underwriting Supplement

Description of Employee Job Duties – check all that apply

- Veterinary Practice/Clinic   
 Pet Boarding/Kennel   
 Grooming   
 Clerical Office   
 Stables  
 Retail Store   
 Laboratory Technicians   
 Janitorial/Custodian   
 Landscape Gardening  
 Salesperson-Outside  
 Other (describe)

Animal Handler Employees: Number of Full Time:                      Number of Part Time:

All Other Employees:                      Number of Full Time:                      Number of Part Time:

1	Do you have a distracted driving policy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2	Is your office equipment ergonomically appropriate for each job duty?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3	Do you practice safe materials handling for heavy or bulky stock or inventory?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4	Do you use treatment tables that raise/lower?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5	Do exam or isolation rooms have two entrances/exits?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6	Are inexperienced animal handlers closely supervised?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7	Do you have a formal new employee training program in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8	Are all workers trained in proper disposal of sharps and medical wastes?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9	Are all workers trained in proper animal lifting and restraining techniques?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10	Are pregnant workers assigned appropriate duties to avoid?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11	Do you follow OSHA guidelines for posting of MSDS sheets for all chemicals?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12	Do you provide and enforce use of personal protective devices to prevent bites, eye injuries, respiratory or dermatological exposure to chemicals, contaminants or biological materials?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
13	Are workers encouraged to report changes in health (including pregnancy) that increases the risk for susceptibility to zoonotic disease agents?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
14	Do workers receive pre-exposure rabies vaccinations and antibody titer checks?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
15	Do you have an infection control program and is it regularly updated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
16	Do all employees wear protective gear whenever handling chemotherapeutic drugs?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
17	Is the facility equipped with engineering systems to control exposure to anesthetic gases such as waste scavenging?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
18	Do you provide hearing protection for workers in loud kennel areas?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
19	Are all emergency contacts posted and available?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
20	Do you have an Employee Handbook which employees must read and sign?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
21	Do you enforce a progressive discipline program for violation of safety procedures?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
22	Have you been cited by OSHA or any state agency for workplace safety violations in the past three years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
23	Are there any outstanding loss control recommendations from your present insurer?	<input type="checkbox"/> Yes	<input type="checkbox"/> No