



Series 400 Personnel	Effective Date 05/23/2018	Review Date <i>Three Years</i>	Directive Number 401.8
Chapter 401 - Career Development			
Reviewing Office <i>Labor Relations/Police Medical</i>			<input type="checkbox"/> New Directive <input checked="" type="checkbox"/> Revised <small>Revisions in <i>italics</i></small>
References			

POLICE MEDICAL AND DUTY STATUS

401.8 - 1 PURPOSE

The purpose of this directive is to *provide* the guidelines for *reporting on and off-duty related injuries or illnesses* of Detroit Police Department Members.

401.8 - 2 POLICY

1. When a member is injured on or off duty, *they shall complete a Report of Injury or Illness Form (DPD101) within the Management Awareness System (MAS) within 48 hours of the injury. If the member is unable to prepare the report, the member's supervisor shall prepare the report. Supervisors shall complete the supervisory portion of the report within 48 hours. A Report of Injury or Illness Form (DPD101) must be prepared whenever the member does the following:*
 - a. Sustains an injury, on or off duty;
 - b. Is on extended sick leave (*more than three (3) days*);
 - c. Is admitted to the hospital for any reason;
 - d. Submits to a surgical procedure of any nature;
 - e. Sustains an exposure incident; or
 - f. Is ordered to prepare a report by a supervisor.

2. *It is the responsibility of a Department designated physician to determine if an injury or illness is duty incurred, as well as, the duty status of a member. Authorized medical clinics shall operate as the Department designated physician where immediate medical attention is necessary for the purposes of determining duty status. Emergency treatment facilities are not authorized to make determinations if an illness or injury is duty incurred.*

3. If a member is in critical condition and/or requires immediate surgery for a duty or *non-duty* related injury or illness, the commanding officer of Police Medical shall be notified immediately. If it occurs during non-regular business hours, on a weekend, or holiday, the commanding officer of Police Medical shall be notified through Communications.

4. Nothing in this directive shall be construed to prohibit or limit supervisory authority to contact Police Medical for an evaluation regarding a member or to conflict with or alter in any manner the Department's attendance control program.

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5. *Members who fail to complete an Injury Report in accordance with 401.8 – 2(1) may be subject to disciplinary action.*

401.8 - 3 Injured/III Members Duty Related

1. For duty-related injuries or illness, a *Report of Injury of Illness Form (DPD101)* shall be completed *within MAS* within 48 hours of the sustained injury or illness.
2. *The following forms shall be completed and faxed to Police Medical at (313) 237-3105, hand delivered, or emailed to policemedical@detroitmi.gov within 48 hours of the sustained duty-related injury or illness:*
 - a. Report of Injury or Illness Form (DPD101);
 - b. *Incident report, if applicable;*
 - c. Activity Log (DPD250);
 - d. Use of Force Report (UF-002), if applicable;
 - e. *Daily Detail;*
 - f. *Documentation of Sick Time (DPD353), if applicable;*
 - g. *Body-camera video, if incident is captured;*
 - h. *Accident report, if applicable; and*
 - i. *Authorization for Treatment Form and a copy of the records from the authorized treatment facility.*
3. Members requiring emergency medical treatment shall be immediately conveyed to the nearest level-1 trauma facility. Duty-related injuries requiring non-emergency medical care shall be conveyed to an authorized occupational medical clinic. *Student Police Officers reporting an allegation of injury that does not require immediate non-emergency medical care shall complete a Report of Injury or Illness Form. The report shall be forwarded to Police Medical for review by a Department designated physician who shall make a determination if the Student Police Officer requires a follow-up visit. Student Police Officers who require immediate non-emergency medical care shall be conveyed to an authorized occupational medical clinic.*
4. Police Medical shall be notified as soon as possible, directly, during normal business hours or via Communications after normal business hours, weekends, and holidays.
5. After receiving treatment, members shall report to Police Medical the next regular business day. If the member is unable to report at that time, they shall make contact with Police Medical via telephone at (313) 237-3100.
6. If the member is reporting an exposure incident or suspected exposure incident that involves a bloodborne/airborne pathogen, a hazmat/toxic substance, or contact with a communicable disease, the member shall complete the Exposure Incident Supplement on the reverse side of the Report of Injury or Illness Form. The section “Source Individual” and “Exposure Type” must be completed. The section “Request to Test Source Individual for HIV/Hepatitis” need only be completed if applicable. *Members reporting duty-related exposure incidents shall be sent to the appropriate authorized medical facility. The area(s) the member was located shall be quarantined, if at all*

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possible. Immediate notification shall be made to the commanding officer of Police Medical via telephone during normal business hours or via Notification and Control after hours.

401.8 - 3.1 Sick Calls – Report of New Duty-Related Injury or Illness

1. Members unable to report for duty because of a *new* duty-related injury or illness shall ensure that their command is notified not less than one (1) hour prior to the start of their scheduled shift daily. In such circumstances, a member calling in sick will not be allowed to work until their next scheduled tour of duty.
2. *The supervisor receiving the notification shall order the member to report to the appropriate Departmental medical facility for examination and treatment. Police Medical shall be notified as soon as possible, directly, during normal business hours or via email at policemedical@detroitmi.gov. A Report of Injury or Illness Form shall be completed. The member shall be ordered to report to Police Medical on the next business day.*
3. When a member makes notifications that they are unable to complete their shift due to a *new* duty-related injury or illness, the supervisor *receiving the notification* shall order the member to report to the appropriate Departmental medical facility for examination and treatment. *Police Medical shall be notified as soon as possible, directly, during normal business hours.* If during non-business hours or during a weekend or holiday, the supervisor shall use Communications to contact Police Medical.
4. The member shall report to the clinic *during the clinic's normal business hours.* The supervisor shall contact the clinic by phone to authorize examination and treatment *and complete the Authorization for Treatment Form.* In addition to making a Desk Blotter entry, the supervisor shall prepare three (3) copies of the Documentation of Sick Time Form (DPD353) and distribute as outlined on the form. The supervisor shall notify Police Medical via email through GroupWise of all medical treatment authorized.
5. *The supervisor shall ensure that the Report of Injury or Illness package is completed as outlined in 401.8 – 3(2) and forwarded to Police Medical.*

401.8 - 3.2 Sick Calls – Report of Reoccurrence or Exacerbation of Duty-Related Injury or Illness

1. *Members unable to report for duty because of a reoccurrence or exacerbation of a prior duty-related injury or illness shall ensure that their command is notified not less than one (1) hour prior to the start of their scheduled shift daily. In such circumstances, a member calling in sick will not be allowed to work until their next scheduled tour of duty. The supervisor shall order the member to report to the appropriate Departmental medical facility for examination and treatment. Police Medical shall be notified as soon as possible, directly, during normal business hours or via email. A Report of Injury or Illness Form shall be completed. The member shall be ordered to report to Police Medical on the next business day.*
2. *When a member makes notifications that they are unable to complete their shift due to a reoccurrence or exacerbation of a prior duty-related injury or illness, the supervisor*

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shall order the member to report to the appropriate Departmental medical facility for examination and treatment. Police Medical shall be notified as soon as possible, directly, during normal business hours. If during non-business hours or during a weekend or holiday, the supervisor shall use Communications to contact Police Medical.

3. *The member shall report to the clinic during the clinic's normal business hours. The supervisor shall contact the clinic by phone to authorize examination and treatment and complete the Authorization for Treatment Form. In addition to making a Desk Blotter entry, the supervisor shall prepare three (3) copies of the Documentation of Sick Time Form (DPD353) and distribute as outlined on the form. The supervisor shall notify Police Medical via email of all medical treatment authorized.*
4. *The supervisor shall ensure that a Supplemental Injury Report and a Supplemental Report of Injury or Illness package is completed as outlined in 401.8-3(2) and forwarded to Police Medical.*

401.8 - 3.3 Psychological/Stress Related *Duty-Related* Illness

1. *If a member is unable to report for duty or finish their shift because of a psychological/stress related illness and indicates the illness is duty related, the supervisor shall notify Police Medical by telephone during regular business hours or through Communications at all other times, and shall be guided by the advice of the commanding officer of Police Medical. A member shall not be sent to an authorized clinic for psychological or stress related problems without the prior approval of the commanding officer of Police Medical.*
2. *Supervisors shall relieve members of appropriate Department-issued equipment when a concern for the health and/or safety of the member, or others, exists.*

401.8 - 3.4 Approved Medical Facilities

1. *In order to provide more expeditious treatment for members injured in the performance of their duties, utilize health services more appropriately, and contain health care costs, Police Medical will designate medical clinics to be utilized by members for treatment of all non-life-threatening injuries sustained by members in the performance of their duties. Approved medical facilities shall be deemed the Department designated physician for immediate non-life threatening injuries.*
2. *Whenever a member is admitted to a hospital or undergoes a surgical procedure as the result of a clinic or an emergency room treatment, Police Medical shall be notified as soon as possible, directly during normal business hours or via email. Hospital emergency rooms are not authorized to make an administrative determination as to the member's duty status (e.g. restricted duty, disabled, etc.), therefore, upon discharge from the emergency room or hospital, the member must contact Police Medical to schedule an evaluation with the Department's designated physician for a duty status determination. Members shall not be allowed to return to work without first obtaining a duty status determination.*

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3. Any problems that are encountered by members utilizing the medical services of the authorized clinic should be reported to Police Medical immediately either in writing or by telephone. Hospital emergency room treatment will continue to be used whenever on-duty injuries are serious in nature, which may require surgery or admission on an in-patient basis.

401.8 - 3.5 Authorized Clinic Treatment Procedures

1. Members incurring a new on-duty injury or illness will report for treatment to an authorized clinic only after receiving authorization from a supervisor. The supervisor shall provide the member with an Authorization for Treatment and Billing Form and call the authorized clinic to notify them of the authorization.
2. Members reporting for treatment at an authorized clinic shall sign in at the clinic desk. After the examination and treatment is concluded, the member will be given a work status. Members shall immediately return to their command where a copy of the work status report will be turned over to a supervisor, and the Report of Injury or Illness Form will be completed.
3. Members certified able to work restricted duty by the clinic shall be given a return date to report for examination or treatment at the clinic during *the clinic's normal business hours*. *Members shall report to Police Medical to obtain a duty status.*
4. Authorization for Treatment and Billing Forms will be kept at each *command* for supervisors to issue for treatment of duty-related injuries. Members will not be sent to the clinic for psychological concerns, but will be referred to Police Medical for appearance during normal business hours. In an emergency, Police Medical will be contacted directly during normal business hours, or via Communications after normal business hours, weekends, or holidays.

401.8 - 3.6 Treatment for Duty-Incurred Injury or Illness

1. In non-emergency and/or post emergency cases, *Department members* who have incurred a duty-related injury or illness must obtain approval from a *Department designated physician* before securing any type of medical attention or treatment for the illness or injury, including x-rays and dental care. The Department will not be liable for costs incurred unless prior approval is obtained. *The City's Third Party Administrator (TPA) operates as the liaison between members and the Department designated physician for approvals in accordance with the determination and treatment plans determined by the Department designated physician.*
2. Members that choose to be seen by their private medical doctor or seek a second opinion for a duty-related injury or illness will do so at their own expense. The Department will not be liable for costs so incurred.
3. To assure proper health safeguards for *Department members*, members who are ordered off duty by a Department physician due to illness or injury, *for a duty-related injury*, shall not be returned to *full* or restricted-duty assignments without being certified for such assignment by a *Department designated physician*.

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401.8 - 3.7 Timekeeping Procedures for Duty-Related Injury or Illness

1. *It is the responsibility of the Department designated physician to determine whether an injury or illness of a member is duty incurred.*
2. *When a member sustains an original injury in the performance of duty during regular duty hours, and is unable to complete their tour of duty, they shall be carried disabled. Commanding officers who approve an immediate disabled status for an original injury shall ensure that Police Medical is notified as soon as possible, directly during normal business hours or via email, pending review and final determination by the Department designated physician.*
3. *At all other times, members shall be carried sick until a determination is made by the Department designated physician. Under no circumstances shall the status of a member being carried sick or disabled be changed in the time book or other Department records without the written authorization of a Department designated physician.*
4. *Upon receipt of the Department designated physician's report determining an injury or illness is duty incurred, Police Medical shall prepare an Inter-Office Memorandum (DPD568) changing sick time to disabled for the duty-incurred injury. The member shall receive a copy of the memorandum for their records.*
5. *Members are automatically assigned to platoon two (2) while disabled. As a condition for continuing disabled status or restricted duty status and the benefits thereof, members must submit to all reasonable examinations ordered by the Department. Failure to do so will lead to immediate termination of disabled or restricted duty status and benefits. Members have a duty to immediately inform Police Medical if their condition improves.*
6. *Members who are disabled and are unable to report to their scheduled medical appointment shall call in to Police Medical. The commanding officer of Police Medical shall be responsible for approving or denying the request in accordance with existing practices for call in procedures.*
7. *If a member is disabled immediately prior to their furlough, they shall not be required to take the assigned furlough. Members shall submit in writing a request to reschedule the furlough. The furlough shall be rescheduled at a mutually acceptable date. Member's on furlough, or another requested and approved discretionary time, shall not be required to appear for medical appointments.*

401.8 - 3.8 Report for Duty When Ordered

1. *Any member declared fit for full or restricted duty by a Department designated physician that does not report for duty shall be considered absent without leave.*
2. *Members who are duty "disabled" or duty "limited duty" shall report for all physical examinations and medical appointments when directed. Furthermore, as a condition for continuing "disabled" or limited duty" status and the benefits thereof, the members must submit to all reasonable examinations ordered by the Department. Failure to do so will lead to immediate termination of such status and benefits.*

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401.8 - 4 Injured/Ill Members Non-Duty Related

1. *For non-duty related injuries or illness, a Report of Injury or Illness Form (DPD101) shall be completed within MAS within 48 hours of the sustained injury or illness, in accordance with 401.8 – 2(4).*
2. *The following forms shall be completed and faxed to Police Medical at (313) 237-3105, hand delivered, or emailed within 48 hours of the sustained non-duty related injury or illness:*
 - a. *Report of Injury or Illness Form (DPD101);*
 - b. *Incident report, if applicable;*
 - c. *Documentation of Sick Time Form (DPD353), if applicable;*
 - d. *Accident report, applicable;*
 - e. *Medical documentation supporting work restrictions; and*
 - f. *Medical documentation supporting an anticipated or actual work absence in excess of 30 days.*
3. *The Department designated physician shall review all submitted documentation and make a determination of restrictions, if any, in accordance with the 24 functions. Members reporting non-duty related injuries or illnesses that require medical attention shall be advised to seek private medical care at their own expense.*
4. *If the member is reporting an exposure incident or suspected exposure incident which involves a bloodborne/airborne pathogen, a hazmat/toxic substance, or contact with a communicable disease, the member must also complete the Exposure Incident Supplement on the reverse side of the Report of Injury or Illness Form. The section “Source Individual” and “Exposure Type” must be completed. The section “Request to Test Source Individual for HIV/Hepatitis” need not be completed unless the member reporting the exposure is requesting the source individual be tested as permitted by statute. The member shall immediately be sent home sick and the areas(s) the member was located shall be quarantined, if at all possible. Immediate notification shall be made to the commanding officer of Police Medical via telephone during normal business hours or via Notification and Control after hours.*

401.8 - 4.1 Submission of Medical Documentation

1. *Members shall provide supporting documentation to substantiate their continued illness/injury, when requested to do so by Police Medical, to the Department designated physician or in accordance with DPD350 requirements.*
2. *Members who are required by Police Medical to submit medical documentation for a non-duty related injury or illness shall provide their private medical doctor (P.M.D.) with a copy of the Etiology Letter and Essential Job Functions of a Police Officer Form supplied by Police Medical.*

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401.8 - 4.2 Visit by Ranking Department Members

Members reporting sick may be visited by *higher ranking Department members* for the purpose of determining the seriousness of the member's illness, and the need for rendering any assistance necessary for the welfare of the member and the member's family.

401.8 - 4.3 Sick Calls – Report of New Non-Duty Related Illness (more than 3 days of injury)

1. *Members unable to report for duty because of a new non-duty related illness that extends more than three (3) days or injury shall ensure that their command is notified not less than one (1) hour prior to the start of their scheduled shift daily. In such circumstances, a member calling in sick will not be allowed to work until the member's next scheduled tour of duty. The exception to this is when a member has taken an E-Day or sick day and has already accepted a pre-scheduled overtime work opportunity. In such cases, a member would be allowed to participate in the prescheduled overtime opportunity providing it is not on the member's assigned shift for which they are off sick. Members who are carried sick on the preceding day need not be contacted for a prescheduled overtime opportunity, unless the member has notified their command that they are ready for duty and will report for their next scheduled tour of duty.*
2. *When a member makes notifications that they are unable to complete their shift due to a new non-duty related illness that extends more than three (3) days or injury, Police Medical shall be notified as soon as possible, directly, during normal business hours or via email.*
3. *The supervisor shall make a blotter entry and prepare three (3) copies of the Documentation of Sick Time Form (DPD353) and distribute it as outlined on the form.*
4. *The supervisor shall ensure that the Report of Injury or Illness package is completed as outlined in 401.8– 4(4) and forwarded to Police Medical.*

401.8 - 4.4 Sick Call – Report of Reoccurrence or Exacerbation of Non-Duty Related Illness in Excess of Three (3) Days or Injury

1. *Members unable to report for duty because of a reoccurrence or exacerbation of a prior non-duty related illness that extends more than three (3) days or injury shall ensure that their command is notified not less than one (1) hour prior to the start of their scheduled shift daily. In such circumstances, a member calling in sick will not be allowed to work until the member's next scheduled tour of duty. The exception to this is when a member has taken an E-Day or sick day and has already accepted a pre-scheduled overtime work opportunity. In such cases, a member would be allowed to participate in the prescheduled overtime opportunity providing it is not on the member's assigned shift for which they are off sick. Members who are carried sick on the preceding day need not be contacted for a prescheduled overtime opportunity, unless they have notified their command that they are ready for duty and will report for their next scheduled tour of duty.*

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2. *When a member makes notifications that they are unable to complete their shift due to a reoccurrence or exacerbation of a prior non-duty related illness that extends more than three (3) days or injury, Police Medical shall be notified as soon as possible, directly, during normal business hours or via.*
3. *In addition to making a Desk Blotter entry, the supervisor shall prepare three (3) copies of the Documentation of Sick Time Form (DPD353) and distribute as outlined on the form.*
4. *The supervisor shall ensure that a Supplemental Injury Report and a Supplemental Report of Injury or Illness package is completed as outlined in 401.8 – 4(4) and forwarded to Police Medical.*
5. *If a member is suffering a non-duty injury/illness that requires immediate medical attention, the supervisor may call for EMS or provide assistance with transportation to a member wishing to seek medical attention under their own insurance plan.*

401.8 - 4.5 Psychological/Stress Related Non-Duty Related Illness

1. *If a member is unable to report for duty or finish their shift because of a psychological/stress related illness and indicates the illness is non-duty related, the supervisor shall notify Police Medical by telephone during normal business hours or through Communications at all other times, and shall be guided by the advice of the commanding officer of Police Medical. A member shall not be sent to an authorized clinic for psychological or stress related problems.*
2. *Supervisors shall relieve members of appropriate Department-issued equipment when a concern for the health and/or safety of the member, or others, exists.*

401.8 - 4.6 Treatment for Non-Duty Incurred Injury or Illness

1. *Though supervisors do not ordinarily have the professional qualifications to permit judgment as to whether or not a member is sick, in some instances, even medically untrained persons can make a determination that someone is sick. Therefore, when it is apparent that a member has reported for duty with a non-duty related injury or illness which obviously impairs the member's ability to perform their duties or whose condition may pose a direct threat to their own health and safety or to the health and safety of other Department members or the public, that member shall not be permitted to work.*
2. *The member shall not be authorized to use any Department approved clinic at Department expense.*
3. *To assure proper health safeguards for Department members, members who are ordered off duty by a Department physician due to illness or injury, for a non-duty related injury, shall not be returned to full or restricted-duty assignments without being certified for such assignment by a Department designated physician.*
4. *All members, before returning to their command from an extended non-duty related illness or injury, shall contact Police Medical for an appointment with the Department designated physician. Members who have been absent from work for over thirty (30) days for a non-duty-related illness or injury shall not be authorized to return to work without a duty status. Commanding officers shall ensure that members who return to*

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work are ordered to Police Medical during normal business hours and notify Police Medical via telephone or email.

5. *All members, before returning to their command, that are admitted to a hospital or underwent a surgical procedure (inpatient or outpatient) shall contact Police Medical for an appointment with the Department's designated physician. Members who have been admitted to the hospital or undergone a surgical procedure shall not be authorized to return to work without a duty status. Commanding officers shall ensure that members who return to work are ordered to Police Medical during normal business hours and notify Police Medical via telephone or email.*

401.8 - 4.7 Report for Duty When Ordered

1. *Any member declared fit for full or restricted duty by the Department's designated physician that does not report for duty shall be considered absent without leave.*
2. *Members who are non-duty sick or restricted duty shall report for all physical examinations and medical appointments when directed.*

401.8 - 4.8 Timekeeping Procedures for Non-Duty Related Injury or Illness

1. *Members shall be carried sick until a determination is made by the Department designated physician.*
2. *Members on sick leave for thirty (30) days shall be ordered to Police Medical upon their return to duty. Supervisors shall notify Police Medical when a member has been on sick leave for thirty (30) days and has not returned to work during normal business hours or via email.*
3. *If a member is sick immediately prior to their furlough, and provides medical proof of such illness, they shall not be required to take the assigned furlough. Members shall submit in writing a request for rescheduling of furlough. The furlough shall be rescheduled at a mutually acceptable date.*

401.8 - 5 Duty Status

A Department designated physician shall be responsible for determining the duty status of a member, for duty-incurred and non-duty incurred injuries or illness. A member may be placed on a full duty status, restricted duty status (with detailed list of restrictions), unable to work status (either "disabled" for duty-incurred injuries or illness or "sick" for non-duty incurred injuries or illness). Police Medical shall be responsible for recording the directive of the Department designated physician on the Duty Status of Officer Form (DPD374). Supervisors must not assign duties that conflict with these directives. If a member is assigned to a command that cannot accommodate any restrictions determined by the Department designated physician, Police Personnel shall be notified, and the member shall be ordered to report to Police Personnel during normal business hours.

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401.8 - 6 Fitness for Duty

1. *The Department and its members have a responsibility to ensure proper services are provided to the community. To this end, it is the responsibility of the Department to ensure that members are fit for duty. If a supervisor believes that a fitness for duty evaluation is appropriate, they shall contact Police Medical immediately and be guided by their direction. Supervisors shall not send members with a non-duty related injury or illness to be seen and/or treated or evaluated for fitness for duty at an authorized clinic.*
2. *Supervisors shall also prepare an Inter-Office Memorandum (DPD568), direct to Police Medical, documenting the reason(s) for the request for a fitness for duty evaluation.*

401.8 - 7 Restricted Duty Status and Assignments

1. *A Department designated physician is responsible for determining the duty status of members of the Department, for duty or non-duty related illnesses or injuries. When a Department designated physician determines that a member is fit for full duty or fit for restricted duty, the members shall report to Police Medical for an updated duty status. Members who are determined to be fit for duty by a Department designated physician who do not report as directed shall be considered absent without leave.*
2. *The Office of the Chief of Police makes the restricted duty assignments. When a member receives a restricted duty status by Police Medical, they shall report immediately with their Duty Status Form (DPD374) to Police Personnel for their duty assignment. Police Medical will make notification of the change of duty status to the member's command.*
3. *A member on restricted duty normally shall not wear a uniform except under emergency conditions when ordered by the member's commanding officer. In such cases however, the member shall not leave the building or travel to and from work in uniform.*

401.8 - 8 Outside Employment/Secondary Employment or other Business Activity

1. *Members shall not engage in outside employment or business activities while on sick, restricted, or disabled when restrictions from the Department designated physician conflict with the outside employment or business activities.*
2. *Under no circumstances may a member engage in any Secondary Employment activity while on sick, restricted, or disabled status.*

401.8 - 9 Medical/Health Care Fraud and Abuse

1. *The Department owes an obligation to the majority of its members, who are hardworking and professional, and the community they serve not to tolerate medical fraud. Violations will result in disciplinary action, including, in appropriate cases, dismissal from the Detroit Police Department and referral for criminal prosecution.*

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2. *Health care fraud is an intentional deception or misrepresentation that the individual or entity makes knowing that the misrepresentation could result in some unauthorized benefit to the individual, the entity, or some other party. Any member making a false claim of injury or illness or otherwise misrepresenting their ability or fitness for duty shall be subjected to Departmental and/or criminal proceedings.*
3. The following are examples of medical fraud (not inclusive):
 - a. Claiming an injury occurred when one did not;
 - b. Falsifying or misrepresenting information in order to remain in a restricted, disabled, or sick status;
 - c. Falsifying information so that a non-work related illness or injury is interpreted as work related; and/or
 - d. Altering medical certificates.

401.8 - 9.1 Reporting of Medical Fraud and Abuse

All members have a duty to report any known violations of any rules and regulations, orders, policies and procedures, and laws. In addition, any members having information concerning possible abuse by another member of sick, disabled, or restricted status shall immediately report such information in writing to the commanding officer of Police Medical, or *Professional Standards*, either direct or through channels.

401.8 - 9.2 Malingering

The definition of malingering is the deliberate exaggeration of psychological and/or physical complaints for the purpose of tangible gain (e.g. medical benefits). Access to resources for members with valid concerns can be obstructed as well as costs escalated by needless tests for falsified symptoms.

401.8 - 10 Requests for Reasonable Accommodations

All requests for reasonable accommodations shall be processed through Police Medical. The commanding officer of Police Medical shall coordinate member engagement in the inter-active process.

401.8 - 11 Absence from Residence for more than 48 Hours

Members must inform their commanding officer where they can be reached whenever absent from their residence in excess of 48 hours by completing an *Absence from Residence Notification Form (DPD261)*. The supervisor acknowledging such notice shall forward a copy of the DPD261 to the commanding officer of Police Medical either direct or through channels for all officers on sick, disabled, or restricted duty status.

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Related Forms:

- Activity Log (DPD250)
- Absence from *Residence* Notification (DPD261)
- Authorization for Treatment Form
- *Incident* Report
- Documentation of Sick Time (DPD353)
- Duty Status Form (DPD374)
- Essential Job Functions of a Police Officer Form
- Etiology Letter
- Exposure Incident Supplement Report (DPD101)
- Inter-Officer Memorandum (DPD568)
- Payroll Adjustment Request (DPD65)
- Report of Injury or Illness (DPD101)
- Use of Force Report (UF-002)