

OSHA Form 301- Supervisor Email



From: noreplyuat@ecomp.dol.gov
To: Revenaugh, Timothy G - OWCP
Cc:
Subject: ECOMP: ECN #104706 requires your review

Sent: Tue 11/27/2012 1:41 PM

An employee of the US government has identified you as his/her supervisor, and has requested that you review and complete an official government form. To access this form, click on this link:

<https://www.training.ecomp.dol.gov/#lid-pktbzy0f4>

ECN #:
- 104706
Form:
- OSHA301
Status:
- Pending review by Supervisor
Status Changed Date:
- 11/27/2012 01:40 PM
Responsible Organization:
- DEPARTMENT OF STATE
- Other Agencies
- BUREAU OF ADMINISTRATION
- PER-ER-EP
Employee's Initials:
- G.R.
Date of Event:
- 11/27/2012
Date Filed:
- 11/27/2012 01:42 PM

If you believe you were sent this message in error, follow the above link and select "I cannot or should not review"

Questions about this email, or ECOMP:
<https://www.training.ecomp.dol.gov>

Please direct problems or issues to:
uat@ecomp.dol.gov

[Message ID: D7466445-A60F-4296-ABF7-E5146D011D8F]

The email will contain a link to access the form for review

The type of form to be reviewed

The initials of the employee

Pertinent dates



- **Supervisor may need to remove caution then cut and paste ECOMP link out of email into browser (security blocks link)**
- **The OSHA 301 is the official notification to Safety for the injury information**





- Users shall protect their accounts by memorizing their passwords and never write them on paper or store them in an electronic file.
- Users shall change their passwords immediately should they suspect that someone else knows their passwords.

Awareness:

- Users shall complete the annual security training provided by their employer.
- Users shall maintain up-to-date essential knowledge of computer security.

Reporting:

- Users shall immediately report security vulnerabilities and violations to proper authorities and their ECOMP Representatives.
- Users shall immediately report accidental or intentional disclosure of ECOMP information to proper authorities and their ECOMP Representatives.

Penalties for Non-compliance:

Users who do not comply with the ROB are subject to penalties that can be imposed under existing policy and regulations, including

- official written reprimands
- suspension of system privileges
- temporary suspension from duty
- removal from current position
- termination of employment
- criminal prosecution

QWCP will enforce the use of penalties against any user who willfully violates any QWCP, Department, or Federal system security (and related) policy.
[Click here](#) to view the complete Rules of Behavior document.



I have read the above document and agree to these Rules of Behavior

NEXT

You will need to review and agree to the Rules of Behavior to proceed.

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00:34 | 07:52



UNITED STATES DEPARTMENT OF LABOR
ECOMP

HOME FORMS DOCUMENTS HELP

ECOMP / SUPERVISOR REVIEW

Supervisor Review

You have been named by an employee of the US government to review this form. You're being asked to fill this out as an employee's supervisor so it may referense you throughout as "The Supervisor."

| | | | |
|-------------------|--------------------------|------------------------------|------------|
| ECN 119383 CA-1 | | Pending Review by Supervisor | |
| Employee | Injured Worker | Date of Event | 03/18/2019 |
| Organization | OFFICE OF ECOMP TRAINING | Initiated | 03/21/2019 |

You should review this form if both of these are true:

Your email is [redacted]@dol.gov
You work as a supervisor at the XX ECOMP TEST (DO NOT USE) for the employee named above.

To proceed with review of the claim, click "Yes, I will review this form."

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A screenshot of the ECOMP system interface. A blue alert dialog box is centered on the screen. The dialog box has a white background with a blue header containing a warning icon and the word "Alert". The main text of the dialog reads: "You have elected to proceed with form review. For security purposes your IP address will be recorded. If you are not authorized to view this form, click Cancel. Otherwise, click 'Agree' to proceed." Below the text are two buttons: a blue "I AGREE" button and a white "CANCEL" button. A mouse cursor is hovering over the "I AGREE" button. In the background, a blurred form is visible with a button labeled "I AGREE TO REVIEW THIS FORM".

When you agree to review the form, your IP address will be recorded for security purposes, as noted.



UNITED STATES DEPARTMENT OF LABOR
ECOMP

HOME FORMS DOCUMENTS HELP

ECOMP 7 CA-1

SUMMARY REVIEW CA-1 SUPERVISOR WORKER INJURY PHYSICIAN WITNESSES TRAUMATIC INJURY REVIEW SIGN

CA-1 Traumatic Injury Claim

ECN 119383 Pending Review by Supervisor

FORM SUMMARY

| | |
|---------------|----------------------------|
| Claimant | Injured Worker |
| Email | injuredworker@doitlook.com |
| ECN | 119383 |
| Date of Event | 03/18/2019 |
| Filed | 03/21/2019 |
| Supervisor | [Redacted]@dol.gov |
| Agency | OFFICE OF ECOMP TESTING |

Click "I Agree" to proceed.

Autosaved



Optional information for the CA-1 form

- OSHA Site Code
- Medical care first received date
- Date and Time employee stopped work
- Date employee pay stopped
- Date 45 day period began
- Third party address
- Anatomical location
- Nature of Injury
- Cause of Injury
- Extent of Injury
- Physician name
- Physician address



or in paper form). [Learn more.](#)

ATTACHMENTS (optional) ⓘ


Max file size is 5MB

Limit number of pages to 10 per document

Allow 4 hours for processing

Upload one document at a time. Each upload is assigned a Document Control Number (DCN). Uploads will be converted to black-and-white.

Accepted file formats: jpeg, jpg, gif, png, txt, tiff, tif, rtf, pdf, doc, docx



CHOOSE A FILE

UPLOADED ATTACHMENTS

- DCN 119384
- Type: General Inquiry (Non-Medical) | Authored Date: 03/19/2019
- Uploaded by [redacted]@dooback.com for 03121COB at 9:09 AM

[View](#)

Next, you may upload any attachments which you wish to submit with the claim.

Autosaved

< EXIT >

04:58 | 07:52



The screenshot shows the ECOMP web application interface. At the top, there is a navigation bar with the text "UNITED STATES DEPARTMENT OF LABOR ECOMP" and links for "HOME", "FORMS", "DOCUMENTS", and "HELP". Below the navigation bar is a progress indicator with nine steps: SUMMARY, REVIEW-CA, SUPERVISOR, BASIC, INJURY, PHYSICIAN & WITNESSES, ATTACHMENTS, REVIEW, and SIGN. The "SIGN" step is currently active. The main content area displays "CA-1 Traumatic Injury Claim" with the identifier "ECN 119383" and the status "Pending Review by Supervisor". Under the "SIGN" section, there are two buttons: "Sign & Forward or File" (highlighted in blue) and "Request for Submission". Below this is an "EVENT (optional)" section with a dropdown menu containing the text "Is this form related to one of these events? (optional)". At the bottom of the form, there are three buttons: a back arrow, "EXIT", and "SIGN AND FORWARD" (highlighted in blue). A large grey text box is overlaid on the bottom of the screenshot, containing the instruction: "If the claim is ready to be forwarded, click 'Sign and Forward Form'".

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HOURS CLAIMED

total hours claimed for this reporting period

DATES

AGENCY

DATE

STATUS

Attention

I understand that a supervisor who knowingly certifies to any false statement, misrepresentation, concealment of fact, etc., in respect to this claim may be subject to appropriate disciplinary or criminal prosecution.

I AGREE

CANCEL

You must agree with the displayed acknowledgement statement to proceed.

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This form has been forwarded for review.


UNITED STATES DEPARTMENT OF LABOR
ECOMP

HOME FORMS DOCUMENTS HELP

ECOMP / CA-1

CA-1 Traumatic Injury Claim

ECN 119383 Pending Final Review by FECA Agency Reviewer

| | | | | |
|---|-------------------|-------------------------|--|-------------------------|
|  FORM 119383 | ECN 119383 CA-1 | | Pending Final Review by FECA Agency Reviewer | |
| | Employee | Injured Worker | Date of Event | 03/18/2019 |
| | Organization | OFFICE OF ECOMP TESTING | Initiated | 03/21/2019 |
| | | | View | Get PDF |

- You can print a copy of this form using the [Get PDF](#) button above.
- A digital copy of this form will be kept by ECOMP for 5 years. (Public Law 91-596 and 29 CFR 1904)

When finished, click "Done" to exit.

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07:12 | 07:52



The screenshot shows the ECOMP (Employees' Compensation Operations & Management Portal) website. At the top, there is a red navigation bar with the ECOMP logo and links for HOME, FORMS, DOCUMENTS, and HELP. Below the navigation bar is a large banner with the text "Welcome to ECOMP" and "The Employees' Compensation Operations & Management Portal".

The main content area is divided into two columns. The left column has three sections:

- Have you been hurt on the job?**: A section with text explaining how to report an injury or illness and file a claim for benefits under the Federal Employees' Compensation Act (FECA).
- Need to upload a document?**: A section explaining that stakeholders can use ECOMP to upload documents to active FECA cases, with a warning not to upload OWCP forms or medical bills.
- UPLOAD DOCUMENTS**: A blue button.

The right column has two sections:

- Need to file a form?**: A section with a "Sign In" form containing fields for "Email or Username" and "Password", a "SIGN IN" button, and links for "Forgot password?" and "Need an account? Register".
- Track status of form or document**: A section with a "TRACK STATUS" button.

A large grey text box is overlaid at the bottom of the screenshot, containing the text: "Once the claim has been received by the AR, he or she will review the information entered for".

At the bottom of the page, there is a copyright notice: "COPYRIGHT © UNITED STATES DEPARTMENT OF LABOR. ALL RIGHTS RESERVED." and a video player control bar showing a time of 07:18 | 07:52.



The screenshot shows the ECOMP (Employees' Compensation Operations & Management Portal) website. At the top, there is a red navigation bar with the ECOMP logo and links for HOME, FORMS, DOCUMENTS, and HELP. Below the navigation bar is a large banner image with the text "Welcome to ECOMP" and "The Employees' Compensation Operations & Management Portal".

The main content area is divided into two columns. The left column has three sections:

- Have you been hurt on the job?**: A section for reporting work-related injuries or illnesses.
- Need to upload a document?**: A section for uploading documents to active FECA cases, with a warning not to upload OWCP forms or medical bills.
- UPLOAD DOCUMENTS**: A blue button to initiate document upload.

The right column has two sections:

- Need to file a form?**: A section for registering an account or signing in. It includes a "Sign In" form with fields for "Email or Username" and "Password", a "SIGN IN" button, and links for "Forgot password?" and "Need an account? Register".
- Track status of form or document**: A section with a "TRACK STATUS" button.

A large, semi-transparent grey box is overlaid at the bottom of the screenshot, containing the text: "the claim by the employee and by you, the supervisor." Below this box, the footer text reads: "COPYRIGHT © UNITED STATES DEPARTMENT OF LABOR. ALL RIGHTS RESERVED."



UNITED STATES DEPARTMENT OF LABOR
ECOMP

HOME FORMS DOCUMENTS HELP

Welcome to ECOMP

The Employees' Compensation Operations & Management Portal

Have you been hurt on the job?

If you are a Federal Employee or a Contractor and have sustained a work-related injury or illness, use ECOMP to report the incident to your supervisor.

If you are a Federal Employee you may also file a claim for benefits under the Federal Employees' Compensation Act (FECA). Depending upon your agency, start by filing OSHA's Form 301, then file a claim using either form CA-1 (for traumatic injury) or form CA-2 (for occupational disease). After you have received an official FECA case number, you may also file form CA-7 (Claim for Compensation).

Need to upload a document?

Stakeholders and interested parties can use ECOMP to upload documents to active FECA cases. You can upload letters, medical reports and other supporting documentation. You will need the official FECA Case Number and other identifying information to use this feature.

Do not upload OWCP forms or medical bills! Forms or bills submitted as uploads will not be processed. Submit medical bills [here](#).

UPLOAD DOCUMENTS

Need to file a form?

Register for an account or sign in to get started.

Sign In

Email or Username

Password

SIGN IN

[Forgot password?](#)

[Need an account? Register](#)

Track status of form or document

TRACK STATUS

Once final review of the CA-1 has been completed, the AR will print the form for your signature, as well as that of the employee.

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07:41 | 07:52



[HOME](#)

[FORMS](#)

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[FAQS & CONTACT FORM](#)

[HOW TO FILE A FORM](#)

[ACCESSIBILITY & 508 COMPLIANCE](#)

USER GUIDES

[AGENCY MAINTENANCE HELP](#)

[AGENCY REVIEWER - FILING FORMS](#)

[AGENCY REVIEWER - MANAGING DISABILITY](#)

[AGENCY REVIEWER - COMMUNICATING WITH OWCP](#)

[INJURED WORKER](#)

[OSHA RECORD KEEPER](#)

[SUPERVISOR FORM REVIEW](#)

[UPLOADING DOCUMENTS TO FECA CASE FILES](#)

USEFUL LINKS

[AGENCY QUERY SYSTEM \(AQS\)](#)

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[OFFICE OF WORKERS](#)

[COMPENSATION PROGRAMS \(OWCP\)](#)

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A case number, you may