

# IN CASE of INJURY

## EN CASO de LESIÓN

### 1. Report injury to your supervisor

Reporte lesiones a su supervisor

### 2. Obtain a slip for treatment authorization

Obtener un comprobante de autorización de tratamiento

### 3. Go to the clinic listed below

Vaya a la clínica que se indica a continuación

Agile Occupational Medicine

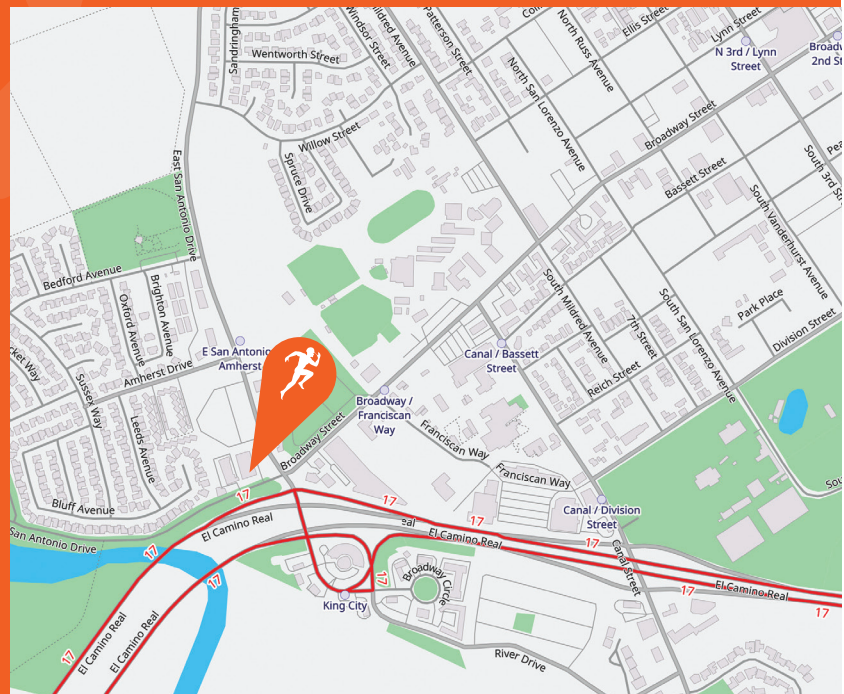
**1180 Broadway Street  
King City, CA 93930**

**831. 385. 8000**

Mon-Fri: 8:30a-5:00p



[agileocmed.com](http://agileocmed.com)



Dial 911 for life threatening injuries

Per OSHA Regulation 1518.50 hang in a conspicuous place