

# What should you do if you have a work accident?

If you have a [work accident](#), here's what you have to do.

## 1. Inform your employer quickly

Your employer must be informed quickly by you or another person when a work accident occurs. This is essential because your employer has an obligation to provide you with first aid. If you have to go to the hospital, a clinic or even home after your accident, your employer will pay the cost of transportation (ambulance, taxi, public transit, etc.).

Inform your employer about your accident even if you do not need medical attention. It is recommended that the incident be recorded in the [Register of Accidents, Incidents and First Aid](#) even if there are no consequences.

## 2. See a physician

You must see a physician if you are injured. You may consult the physician of your choice. They will give you a medical certificate. You will need it to file your [worker's claim](#).

If you are unable to work for the rest of the day, your employer must pay you 100% of your wages for that day's absence.

The physician will set your return-to-work date. If you are unable to return to your regular job in the short term, your employer may offer you a [temporary assignment](#).

## 3. Give the medical certificate to your employer

If you are unable to [return to work](#) the day after the accident, you must give the medical certificate to your employer.

Your employer must complete the "[Avis de l'employeur et demande de remboursement](#)" form for your first 14 days of absence, send it to CNESST and give you a copy.

Your employer must pay you 90% of your net wages for the days you would normally have worked, not including the day of the accident.

## 4. Fill out the Worker's claim form

### Online service for workers

La Réclamation du travailleur (Worker claim) is a service available from MonEspace CNESST that allows you to claim compensation or reimbursement. By using this service, your file can be processed more quickly.

The CNESST will inform you by email of the status of your file. You will be asked to consult messages and documents placed in this secure space.

The [Worker's claim](#) form is used to file your claim for compensation with the CNESST, for example if you have to be absent from work for more than 14 days. You must have completed your claim to be able to [claim certain expenses](#) such as medical or travel expenses. You can be reimbursed for expenses even if you did not have to be absent from work.

### Important

You have 6 months to file your claim with the CNESST from the date of your accident.

When you file your claim, send us all the relevant documents, such as your medical certificate, receipts and prescriptions. This will facilitate the processing of your claim. Give a copy of your claim to your employer too.

If your work accident occurred outside Québec, you may have to [choose between being compensated by the CNESST or by another organization](#) that administers a compensation plan.

## 5. Undergo medical examinations

It is important that you undergo all the medical examinations requested and that you follow all the treatments prescribed by your physician. You may have to undergo additional medical examinations if requested by the CNESST or your employer.

You are obliged to attend the medical examinations. Therefore, it is important to follow your physician's recommendations to ensure that your file is as complete as possible. If you do not attend the examinations, there may be penalties on the amounts that may be paid to you.

## 6. Inform the CNESST of any changes in your situation

You must inform us of any changes in your medical situation or that could affect your case. For example, a change in your health or a move must be reported to the CNESST to keep your file up to date.

When you know the date of your [return to work](#), you must inform your employer and the CNESST immediately.

### Forms and publications

[En cas d'accident ou de maladie du travail... voici ce qu'il faut savoir! \(Document d'information\)](#)

[Worker's claim \(Formulaire\)](#)

[Avis de l'employeur et demande de remboursement \(ADR\) – Accident du travail – Maladie professionnelle \(Formulaire\)](#)

[Application for reimbursement of expenses \(Formulaire\)](#)

[Appendices to the Worker's claim in the case of an occupational disease \(Formulaire\)](#)

### Laws and regulations

[Loi sur les accidents du travail et les maladies professionnelles \(LATMP\)](#)