

February 2008

## A GUIDE TO OSHA RECORDKEEPING

The Occupational Safety and Health Administration (OSHA) was established in 1970 to prevent work-related injuries, illness and death, and one of OSHA's main tools is data gathering. This places a recordkeeping burden on most employers, who must fill out several forms and log work-related illnesses and injuries. We offer a brief, practical guide to OSHA recordkeeping compliance.

---

## THE FORMS TO FILL OUT

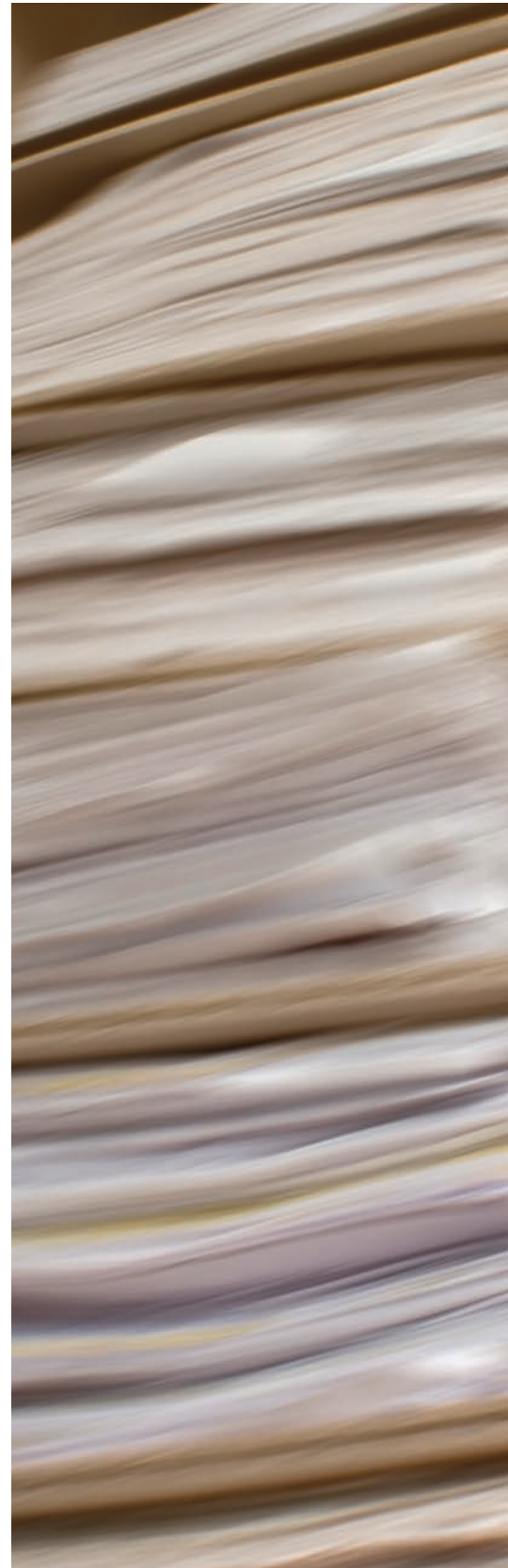
### THE MAIN LOG

The *Log of Work-Related Injuries and Illnesses* is used to classify work-related injuries and illnesses and to note the extent and severity of each case. When an incident occurs, use the log to record required details about what happened and how it happened. This data is registered on several forms: OSHA Form 300, 300A and 301. If your facility has more than one establishment or site, you must keep *separate records for each physical location* that is expected to remain in operation for one year or longer.

### THE SUMMARY TO POST

The summary form (300A) tracks work-related injury and illness totals for the year by category. You will need to list the annual average number of employees and total hours worked by all employees on the summary. The OSHA forms include a worksheet to help you calculate the totals. To arrive at totals for the previous calendar year, count the number of incidents in each category and transfer the totals manually or use the spreadsheet (available on OSHA's website), which will automatically transfer the totals to a separate sheet.

Special treatment must be accorded bloodborne pathogen exposures and needlesticks. Occupationally contracted HBV or HIV are recorded on the OSHA 300 Log of Occupational Injuries and Illnesses as an injury and kept confidential. Exposures to bloodborne pathogens from contact with sharp objects (referred to as sharps)



will be recorded on a sharps injury log (see below) and on the OSHA 300 form.

The current forms and procedures include several changes from the 200 series.

- Form 300A must be certified and posted by February 1 of the next year, until April 30.
- Each case must be logged on Forms 300 and 301 within *seven calendar days* of hearing about an incident.
- Employee's names should not be included in OSHA paperwork if the case involves a *privacy issue*.
- Employee representatives must be granted access to the parts of Form 301 relevant to the employees they represent.
- To calculate the number of days of restricted work or days away from work, count calendar days starting the day after the incident occurs. Stop counting when either number, or a combination of both, equals 180 days.

Copies of the forms can be obtained on OSHA's website.

## HOW LONG MUST YOU KEEP THE LOG AND SUMMARY ON FILE?

*You must keep log and summary for five years following the year to which they pertain.*

## DO YOU HAVE TO SEND THESE FORMS TO OSHA AT THE END OF THE YEAR?

*No. You do not have to send the completed forms to OSHA unless specifically asked to do so.*

## WHAT TO RECORD, WHAT NOT TO RECORD

OSHA has general and specific reporting requirements. According to the general rules, employers must record:

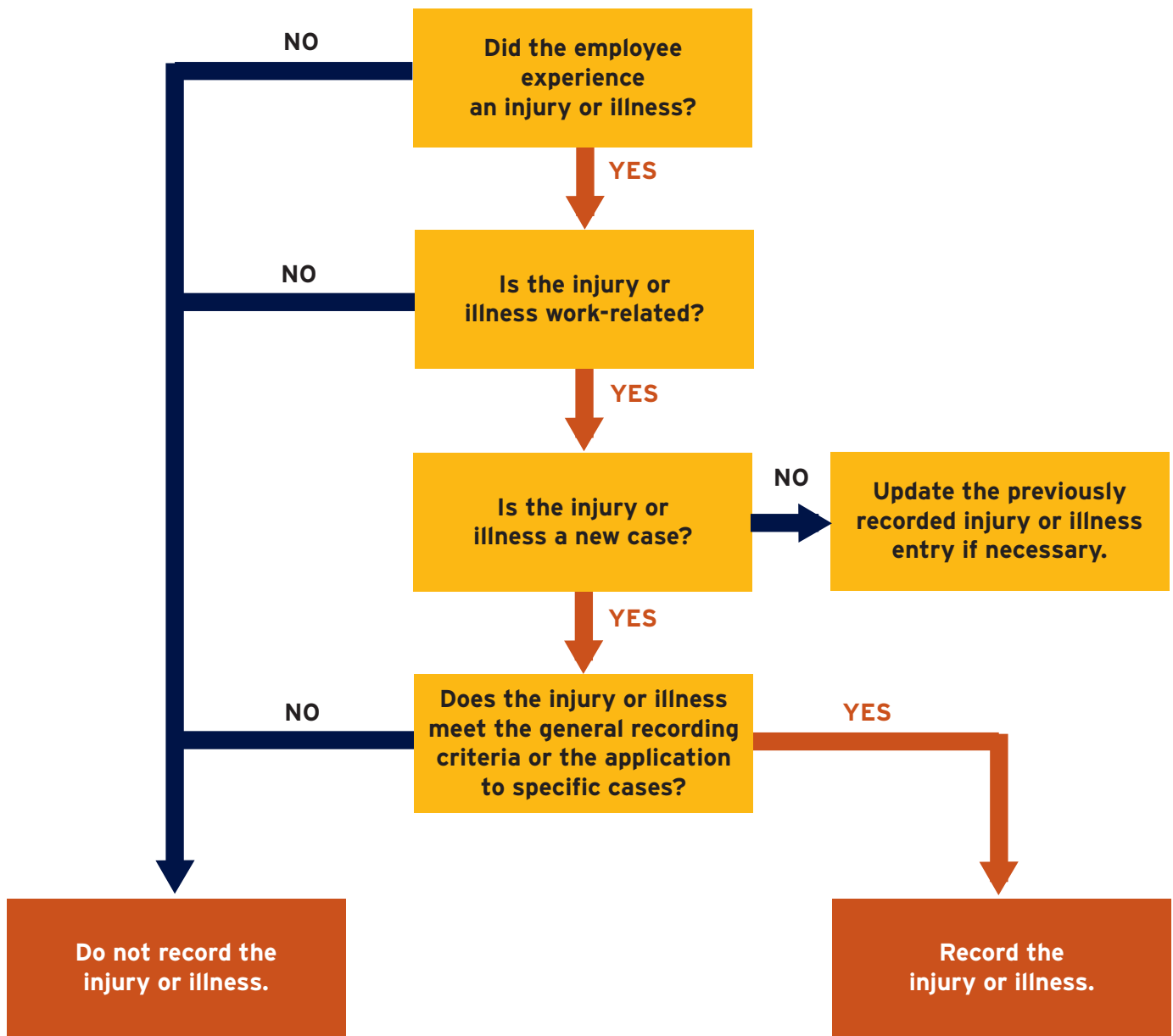
- Days away from work
- Restricted work or transfer to another job
- Medical treatment beyond first aid
- Loss of consciousness
- Death

Specific cases that must be reported include:

- Needlesticks/sharps contaminated with blood or other potentially infectious material
- MSDs (musculoskeletal disorders)
- Hearing loss
- Tuberculosis infection
- Medical removal required by OSHA's health standard



# OSHA DECISION-MAKING FLOW CHART



## DEFINITION OF FIRST AID

Incidents requiring only first aid do not need to be recorded. Here is a guide to what treatments are considered first aid.

- Using a nonprescription medication at nonprescription strength (use of prescription or nonprescription drugs at prescription strength at the recommendation of a healthcare professional is considered medical treatment for recordkeeping purposes)
- Administering tetanus immunizations (other immunizations, such as Hepatitis B vaccine or rabies vaccine are considered medical treatment)
- Cleaning, flushing or soaking wounds on the surface of the skin



- Using wound coverings such as bandages, Band-Aids™, gauze pads, butterfly bandages or Steri-Strips™ (other wound closing devices such as sutures, staples, etc., are considered medical treatment)
- Using hot or cold therapy
- Using any nonrigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc. (devices with rigid stays or other systems designed to immobilize parts of the body are considered medical treatment)
- Using temporary immobilization devices while transporting an accident victim (splints, slings, neck collars, backboards, etc.)
- Drilling of a fingernail or toenail to relieve pressure, or draining fluid from a blister
- Using eye patches
- Removing foreign bodies from the eye using only irrigation or a cotton swab
- Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means
- Using finger guards
- Using massages (physical therapy or chiropractic treatment are considered medical treatment)
- Drinking fluids for relief of heat stress

## PRIVACY CASES

When an employee's privacy is at issue in an incident, the employer must take the following steps.

- Do not enter the name of an employee on the OSHA Form 300
- Enter "privacy case" in the name column
- Keep a separate confidential list of the case numbers and employee names

Incidents where privacy is a concern include:

- An injury or illness to an intimate body part or reproductive system
- An injury or illness resulting from sexual assault
- Mental illness
- HIV infection, hepatitis, tuberculosis
- Injuries with sharps contaminated with the blood of others or other potentially infectious material

Employees may request that their name be kept off of other illness cases as well.

Employers may use discretion in describing the case if an employee can be identified. If employers give the forms to people not authorized to review them, the names must be removed. Exceptions are made for:

- Auditor/consultants
- Workers' Compensation or other insurance professionals
- Public health authority or law enforcement agency staff

# SHARPS INJURY LOG

CASE NUMBER	TYPE AND BRAND OF DEVICE INVOLVED	DEPARTMENT/ WORK AREA	DESCRIPTION OF INCIDENT

# CONTACT INFORMATION

For additional information, please  
contact:

**Bob Lombard**

Sr. Vice President & Regional Director

Willis Pooling Practice

1755 E. Plumb Lane, Suite #269

Reno, NV 89502

775 323 1656 Ext. 19 (Office)

775 858 6335 (Cell)

[lombard\\_bj@willis.com](mailto:lombard_bj@willis.com)

