

that should be included under each category. In cases where the time of onset of illness is in doubt, the day of diagnosis of illness will be considered as the first day of illness.

(i) Code 21—*Occupational Skin Diseases or Disorders*. Examples: Contact dermatitis, eczema, or rash caused by primary irritants and sensitizers or poisonous plants; oil acne; chrome ulcers; chemical burns or inflammations.

(ii) Code 22—*Dust Diseases of the Lungs (Pneumoconioses)*. Examples: Silicosis, asbestosis, coal worker's pneumoconiosis, and other pneumoconioses.

(iii) Code 23—*Respiratory Conditions due to Toxic Agents*. Examples: Pneumonitis, pharyngitis, rhinitis, or acute congestion due to chemicals, dusts, gases, or fumes.

(iv) Code 24—*Poisoning (Systemic Effects of Toxic Materials)*. Examples: Poisoning by lead, mercury, cadmium, arsenic, or other metals, poisoning by carbon monoxide, hydrogen sulfide or other gases; poisoning by benzol, carbon tetrachloride, or other organic solvents; poisoning by insecticide sprays such as parathion, lead arsenate; poisoning by other chemicals such as formaldehyde, plastics and resins.

(v) Code 25—*Disorders Due to Physical Agents (Other than Toxic Materials)*. Examples: Heatstroke, sunstroke, heat exhaustion and other effects of environmental heat; freezing, frostbite and effects of exposure to low temperatures; caisson disease; effects of ionizing radiation (radon daughters, non-medical, non-therapeutic X-rays, radium); effects of nonionizing radiation (welding flash, ultra-violet rays, microwaves, sunburn).

(vi) Code 26—*Disorders Associated with Repeated Trauma*. Examples: Noise-induced hearing loss; synovitis, tenosynovitis, and bursitis; Raynaud's phenomena; and other conditions due to repeated motion, vibration or pressure.

(vii) Code 29—*All Other Occupational Illnesses*. Examples: Infectious hepatitis, malignant and benign tumors, any form of cancer, kidney diseases, food poisoning, histoplasmosis.

(8) Item 24. Miner's work activity when injury or illness occurred. Describe exactly the activity of the injured miner when the occupational in-

jury or occupational illness occurred. For example: "Setting temporary support prior to drilling holes for roof bolts."

(Secs. 103 (a) and (h), and 508, Pub. L. 91-173, as amended by Pub. L. 95-164, 91 Stat. 1297, 1299, 83 Stat. 803 (30 U. S. C. 801, 813, 957))

[42 FR 65535, Dec. 30, 1977; 43 FR 1617, Jan. 11, 1978, as amended at 44 FR 52828, Sept. 11, 1979; 69 FR 26499, May 13, 2004]

§ 50.20-7 Criteria—MSHA Form 7000-1, Section D.

This section requires information concerning the miner's return to duty.

(a) Item 28. Permanently transferred or terminated. Check this block if the miner's employment was terminated or if the miner was permanently transferred to another regular job as a direct result of the occupational injury or occupational illness.

(b) Item 29. Show the date that the injured person returned to his regular job at full capacity (not to restricted work activity) or was transferred or terminated.

(c) Item 30. Number of days away from work. Enter the number of workdays, consecutive or not, on which the miner would have worked but could not because of occupational injury or occupational illness. The number of days away from work shall not include the day of injury or onset of illness or any days on which the miner would not have worked even though able to work. If an employee loses a day from work solely because of the unavailability of professional medical personnel for initial observation or treatment and not as a direct consequence of the injury or illness, the day should not be counted as a day away from work.

(d) Item 31. Number of days of restricted work activity. Enter the number of workdays, consecutive or not, on which because of occupational injury or occupational illness:

(1) The miner was assigned to another job on a temporary basis;

(2) The miner worked at a permanent job less than full time; or

(3) The miner worked at a permanently assigned job but could not perform all duties normally connected with it. The number of days of restricted work activity shall not include the day of injury or onset of illness, or

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any days the miner did not work even though able to work.

If an injured or ill employee receives scheduled follow-up medical treatment or observation which results in the loss of a full workday solely because of the unavailability of professional medical personnel, it will not be counted as a day of restricted work activity. Days of restricted work activity end as the result of any of the following:

(i) The miner returns to his regularly scheduled job and performs all of its duties for a full day or shift;

(ii) The miner is permanently transferred to another permanent job (which shall be reported under Item 28, Permanently Transferred or Terminated). If this happens, even though the miner could not perform this original job any longer, the Days of Restricted Work Activity will stop; or

(iii) The miner is terminated or leaves the mine. (Termination shall also be reported under Item 28, Permanently Transferred or Terminated).

Subpart D—Quarterly Employment and Coal Production Report

§ 50.30 Preparation and submission of MSHA Form 7000-2—Quarterly Employment and Coal Production Report.

(a) Each operator of a mine in which an individual worked during any day of a calendar quarter shall complete a MSHA Form 7000-2 in accordance with the instructions and criteria in § 50.30-1 and submit the original to the MSHA Office of Injury and Employment Information, P.O. Box 25367, Denver Federal Center, Denver, Colo. 80225, within 15 days after the end of each calendar quarter. These forms may be obtained from the MSHA District Office. Each operator shall retain an operator's copy at the mine office nearest the mine for 5 years after the submission date. You may also submit reports by facsimile, 888-231-5515. To file electronically, follow the instructions on MSHA Internet site, <http://www.msha.gov>. For assistance in electronic filing, contact the MSHA help desk at 877-778-6055.

(b) Each operator of a coal mine in which an individual worked during any

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day of a calendar quarter shall report coal production on Form 7000-2.

[42 FR 65535, Dec. 30, 1977, as amended at 60 FR 35695, July 11, 1995; 69 FR 26499, May 13, 2004]

§ 50.30-1 General instructions for completing MSHA Form 7000-2.

(a) *MSHA I.D. Number* is the 7-digit number assigned to the mine operation by MSHA. Any questions regarding the appropriate I.D. number to use should be directed to your local MSHA District Office.

(b) *Calendar Quarter*: First quarter is January, February, and March. Second quarter is April, May, and June. Third quarter is July, August, and September. Fourth quarter is October, November, and December.

(c) *County* is the name of the county, borough, or independent city in which the operation is located.

(d) *Operation Name* is the specific name of the mine or plant to which the MSHA I.D. number was assigned and for which the quarterly employment report is being submitted.

(e) *Company Name* is the name of the operating company that this report pertains to.

(f) *Mailing Address* is the address of the mine office where the quarterly employment report is to be retained. This should be as near the operation as possible.

(g) *Employment, Employee Hours, and Coal Production*—(1) *Operation Sub-Unit*:

(i) *Underground Mine*: Report data for your underground workers on the first line. If you have personnel working at the surface of your underground mine, report data for those persons on the second line;

(ii) *Surface Mine (Including Shops and Yards)*: Report on the appropriate line, employment and coal production for the mining operation. For surface mining sub-units 03, 04, 05 and 06, include all work associated with shops and yards;

(iii) *Mill Operations, Preparation Plants, Breakers*: Report data on all persons employed at your milling (crushing, sizing, grinding, concentrating, etc.) operation, preparation plant, or breaker, including those working in associated shops and yards. (Do not include personnel reported in