INSTRUCTIONS FOR COMPLETING LOG OF FEDERAL OCCUPATIONAL INJURIES AND ILLNESSES (OSHA FORM NO. 100F)

Column 1—CASE OR FILE NUMBER

Any number may be entered which will facilitate comparison with supplementary records.

Column 2—DATE OF INJURY OR ILLNESS

For occupational injuries enter the date the work accident which resulted in injury. For occupational illness enter the date of initial diagnosis of illness, or, if absence occurred before diagnosis, the first day of the absence in connection with which the case was diagnosed.

Column 3 — EMPLOYEE'S NAME

Column 4—OCCUPATION

Enter the occupational title of the job to which the employee was assigned at the time of injury or illness. In the absence of a formal occupational title, enter a brief description of the duties of the employee.

Column 5—DEPARTMENT

Enter the name of the department to which employee was was assigned at the time of injury or illness, whether or not employee was actually working in that department at time. In absence of formal department titles, enter a brief description of normal workplace to which employee is assigned.

Column 6—NATURE OF INJURY OR ILLNESS AND PART(S) OF BODY AFFECTED

Enter a brief description of the injury or illness and indicate the part or parts of body affected. Where entire body is affected the entry "body" can be used.

Column 7- INJURY OR ILLNESS CODE

Enter the one code which most accurately describes the nature of injury or illness. An list of codes appears at the bottom of the log. A more complete description of occupational injuries and illnesses appears below in "definitions."

Column 8—FATALITIES

If the occupational injury or illness resulted in death, enter date of death.

Column 9-LOST WORKDAYS CASES

Enter a check for each case which involves days away from work, or days of restricted work activity, or both. Each lost workday case also requires an entry in column 9A or column 9B, or both.

Column 9A—LOST WORKDAYS—DAYS AWAY FROM WORK Enter the number of workdays (consecutive or not) on which the employee would have worked but could not because of occupational injury or illness. The number of lost workday should not include the days of injury or onset of illness or any days on which the employee would not have worked ever through able to work.

NOTE For employee not having a regularly schedule shift, i.e., certain truck drivers, construction workers, part-time employees, etc, it may be necessary to estimate the number of lost workdays. Estimates of lost workdays shall be based on prior work history of the employee and days worked by employee, not all or injured, working in the department and/or occupational of the ill or injured employee.

Column 9B—LOST WORKDAYS—DAYS OR RESTRICTED WORK ACTIVITY

Enter the number of workdays (consecutive or not) on which because of injury or illness:

- the employee was assigned to another job on a temporary basis,
- the employee worked at a permanent job less than full time, or
- 3) the employee worked at a permanently assigned job but could not perform all duties normally connected with it. The number of lost workdays should not include the day of injury or onset of illness or any days on which the employee would not have worked ever through able to work.

Column 10—NONFATAL CASES WITHOUT LOST WORK-DAYS

Enter a check in Column 10 for all cases of occupation injury or illness, which did not involve fatalities or lost workdays.

Column 11—TRANSFER TO ANOTHER JOB OR TERMINA-TION OF EMPLOYMENT WITHOUT LOST WORKDAYS If the check in Column 10 represented a transfer to another job or termination of employment with no lost workdays., enter another check in Column 11.

INITIATING REQUIREMENT

Each line entry regarding an occupational injury or illness must be initialed in the right hand margin by the person responsible for the accuracy of the entry. Charges in an entry also must be initiated in the affected column 11.

CHANGES IN EXTENT OF OR OUTCOME OF INJURY OR

If there is a change in an occupational injury or illness case which affects entries in Column 9, 10, or 11, the first entry should be lined out and a new entry made. For example, if an injured employee at first required only medical treatment but later lost workdays, the check in Column 10 should be lined out and the number of lost workdays entered in Column 9.

In another example, if an employee with an occupational illness lost workdays, returned to work, and then dies of the illness, the workdays noted in Column 9 should be lined out and the date of death entered in Column 8.

An entry may be lined out if later found to be a nonoccupational injury or illness.

DEFINITIONS OF TERMS FOR USE IN RECORDING FEDERAL OCCUPATIONAL INJURIES AND ILLNESS

OCCUPATIONAL INJURY is any injury such as a cut, fracture, sprain, amputation etc,. which results from a work accident or from exposure in the work environment.

OCCUPATIONAL ILLNESS of an employee is any abnormal condition or disorder, other than one resulting from an occupational injury caused by exposure to environmental factors associated with his employment. It includes acute and chronic illnesses or diseases which may be caused by inhalation absorption, ingestion or direct contact and which can be included in the categories listed below.

The following listing give the categories of occupational illnesses and disorders that will be utilized for the purpose of classifying recordable illnesses. The identifying codes are those to be used in Column 7 of the log. For purposes or information example of each category are given. These are typical examples, however, and are not to be considered to be the complete listing of the types of illnesses and disorders that are to be counted under each category.

- (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; etc.
- (22) Dust Disease of the Lungs (Pneumoconioses) Examples: Silicosis, asbestosis coal worker's pneumoconiosis byssinosis, and other pneumoconioses.
- (23) Respiratory Conditions Due to Toxic Agents Examples: Pneumonititis, pharyngitis rhinitis or acute congestion due to chemicals dusts gases or fumes; farmer's lung; etc.
- (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 tetra-chloride or other organic
 solvents; poisoning by insecticide sprays such as
 parathion lead arsenate; poisoning by other
 chemicals such as formaldehyde plastics and resins
 etc.
- (25) Disorders Due to Physical Agents (Other Than Toxic Materials)
 Examples Heatstroke, sunstroke, heat exhaustion and other effects or environmental heat; freezing, frostbite and effects of exposure to low temperatures; caisson disease, effects of ionizing radiation (isotopes, X-rays, radium); effects of nonionizing

- radiation (welding flash, ultraviolet rays, microwaves, sunburn), etc.
- (26) Disorder Due to Repeated Trauma Examples: Noise-induced hearing loss: synositis, tenosynsitis, and bursitis; Raynaud's phenomena and other conditions due to repeated motion, vibration or pressure.
- (29) All Other Occupational Illnesses Examples: Anthrax. brucellosis, infectious hepatitis, malignant and benign tumors, food poisoning, histoplasmosis, coccidiodomycosis, etc.

RECORDABLE OCCUPATIONAL INJURIES AND ILLNESSES are any occupational injuries or illnesses which result in:

- FATALITIES, regardless of the time between the injury and death, or the length of the illness; or
- LOST WORKDAYS CASES, other than fatalities that result in lost workday; or
- 3) NONFATAL CASES WITHOUT LOST WORKDAYS, which results in transfer to another job or termination of employment, or require medical treatment (as defined below), or involve loss of consciousness. This category also includes any diagnosed occupational illness which are reported to The Agency but are not classified as fatalities or lost workday cases.

MEDICAL TREATMENT includes treatment administered by a physician or by registered professional personnel under the standing orders of a physician. Medical treatment does NoT include first aid treatment (one-time treatment and subsequent observation of minor scratches, cuts, burns, splinters and so forth, which do not ordinarily require medical care) even though provided by a physician or registered professional personnel.

ESTABLISHMENT: A single physical location where business is conducted or where service or industrial operations are performed (For example: warehouse, or central administrative office.) Where distinctly separate activities are performed at a single physical location (such as contract construction activities operated from the same physical location as a lumber yard) each activity shall be treated as a separate establishment.

Agencies engaged in activities such as agriculture construction, transportation, communications, and electric gas and sanitary service which may be physically dispersed, records may be maintained at a place to which employees report each day.

Records for personnel who do not primarily report to work at a single establishment, such as traveling technicians engineers etc., shall be maintained at the location from which they are paid or the base from which personnel operate to carry out their activities.

WORK ENVIRONMENT is comprised of The physical location, equipment, materials processed or used, and the kinds of operations performed by an employee in the performance or his work whether on or off the Agency's premises.