

Report from the
Working Group
on
Accident –
Incident
Reporting

OBJECTIVES

- Conform to new OSHA rule
- Update and improve codes to reduce need for narrative entries
- Recognize changes in the industry
- Clarify commuter / Amtrak reporting (follows up on NTSB recommendation)
- Provide clarifications as needed

OSHA Conforming Changes

- First Aid Treatment
- Medical Treatment
- “Covered Data”

OSHA Conforming Changes to Definitions

- First Aid Treatment

Now includes:

- Use of an eye patch, butterfly bandage, or Steri-StripTM
- Immobilization of a body part for transport

- Medical Treatment

(any medical care beyond “first aid”)

- does not include counseling

part of the day and to another job for the rest of the day, the injury or illness involves a job transfer. You must report an injury or illness that involves a job transfer by placing a "Y" (for yes) in the box for job transfer, 5r.

Q49. How do I count days of job transfer or restriction?

A49. You count days of job transfer or restriction in the same way you count days away from work. The only difference is that, if you permanently assign the injured or ill employee to a job that has been modified or permanently changed in a manner that eliminates the routine functions the employee was restricted from performing, you may stop the day count when the modification or change is made permanent. You must count at least one day of restricted work or job transfer for such cases.

First Aid And Medical Treatment

Q50. How do I report an injury or illness that involves medical treatment beyond first aid?

A50. If a work-related injury or illness results in medical treatment beyond first aid, you must report it on the FRA form 6180-55a.

"Medical treatment" means the management and care of a patient to combat disease or disorder. For the purposes of Part 225, medical treatment does not include:

- (1) Visits to a physician or other licensed health care professional solely for observation or counseling;
- (2) The conduct of diagnostic procedures, such as x-rays and blood tests, including the administration of prescription medications used solely for diagnostic purposes (e.g., eye drops to dilate pupils); or

- (3) **First aid treatment.** The following is an all inclusive list of "First aid treatment". **If the treatment given is not on this list, it is considered to be "Medical treatment".** For the purposes of Part 225, "first aid" means the following:

- (a) Using a nonprescription medication at nonprescription strength (for medications available in both prescription and non-prescription form); **a recommendation by a physician or other licensed health care professional to use a non-prescription medication at prescription strength is considered medical treatment for recordkeeping purposes.**
- (b) Administering tetanus immunizations (other immunizations, such as Hepatitis B vaccine or rabies vaccine, are considered medical treatment);
- (c) Cleaning, flushing or soaking wounds on the surface of the skin;
- (d) Using wound coverings such as bandages, Band-Aids™, gauze pads, or using butterfly bandages or Steri-Strips™ (other wound closing devices such as sutures, staples, or surgical glues are considered

Covered Data – Days Lost or Restricted

- Health Professional recommends that the Employee take one or more days away from work or restricted time
- Employee chooses **not** to take any time away from work or restricted time
- Case is not otherwise an FRA reportable

Covered Data – Days Lost or Restricted

- Under existing FRA system the case is not reportable
- Proposed System – case is reportable to FRA for transfer to Department of Labor (consistency of inter-industry data)
- This case
 - will not become part of FRA's Statistical Publications (i.e., will not count against RRs)
 - will become part of FRA's database and be available on the web

Covered Data – OTC Drug at Prescription Strength

- Health Professional recommends that employee take at OTC Medication at a prescription strength dosage
- Case is not otherwise an FRA reportable

Covered Data – OTC Drug at Prescription Strength

- Under existing FRA system the case is not reportable
- Proposed System – case is reportable to FRA for transfer to Department of Labor (consistency of inter-industry data)
- This case
 - will not become part of FRA's Statistical Publications (i.e., will not count against RRs)
 - will become part of FRA's database and be available on the web

Covered Data & Incorporated Terms

- “Covered data” would be excluded from the incorporated terms “accident or incident reportable under Part 225” and “reportable injury” so that the data:
 - does not partly trigger alcohol and drug testing under Part 219
 - does not serve as a partial basis for engineer decertification under Part 240

Revised Injury Code

- New Injury/Illness codes were added
- Expanded Parts of Body

INJURIES

Use the codes on this page to identify the nature and body part affected for both fatal and nonfatal injuries. For example, a broken collarbone would be recorded as "706E". When an individual has sustained multiple injuries, the most severe of these is to be identified. If the injuries are of equal severity, for example, cuts or abrasions on arms and legs, then the multiple location code "8" may be used.

NATURE OF INJURY

- 10 Bruise or contusion
- 13 **Crushing injury**
- 20 Sprain or strain
- 30 Cut/laceration or abrasion
- 35 Puncture wound (**other than needle stick**)
- 36 **Needle stick**
- 40 Electrical shock or burn
- 50 Other burns
- 60 Dislocation
- 70 Fracture (**broken bone**)
- 71 **Rupture/tear, e.g., tendon, cartilage (for hernia, use code 92)**
- 72 **Gunshot/knife wounds**
- 74 **Animal/snake/insect bite**
- 75 Dental related
- 80 Amputation
- 90 **FATALLY INJURED**
- 91 Foreign object in eye
- 92 Hernia
- 93 **Concussion/closed head injury**
- 94 Nervous shock (injury related)
- 95 Internal injury
- 96 Loss of eye
- 97 Reaction from one-time external exposure to chemicals
- 98 **Symptoms due to** one-time exposure to loud noise, e.g., an explosion
- 9A **Symptoms due to** one-time exposure to fumes that does not exceed a single duty tour and without long term or permanent consequences
- 9B **Medical removal (under OSHA medical surveillance requirements)**
- 99 All other injuries

LOCATION OF INJURY CODES

1 Arm or hand:

- A - upper arm
- B - elbow
- C - lower arm
- D - wrist
- E - hand (general)
- F - thumb/fingers
- G - finger/thumb nail(s)

5 Head or face:

- A - eye
- G - eye area (not eyeball), e.g., eye lid
- B - ear and surrounding area
- C - nose
- D - mouth/teeth
- E - skull/scalp
- F - neck/throat
- H - jaw/chin
- I - cheek
- J - forehead
- K - intracranial

3 Leg or foot:

- A - upper leg
- B - knee
- C - lower leg
- D - ankle
- E - heel
- F - toes
- G - foot (general)

6 Torso:

- A - spine/spinal cord
- B - upper back
- C - lower back
- D - shoulder (includes rotator cuff)
- E - collar bone
- F - ribs/sternum
- G - internal injuries
- H - external injuries - other
- I - hips/buttocks/pelvis
- J - genitalia/groin area
- K - abdomen
- L - chest

8 Injuries to multiple body parts of relatively equal severity

9 Other body parts

OCCUPATIONAL ILLNESS CODES

Occupational Skin Diseases or Disorders

- 1101** Dermatitis (inflammation of the skin)
- 1102** Eczema - inflammation of the skin characterized by the formation of vesicles (blisters) which may be either acute or chronic
- 1103** Rash caused by primary irritants and sensitizers or poisonous plants
- 1104** Oil acne - sometimes known as oil folliculitis, it is an inflammation of the hair follicles caused by depositing of oil into them, resulting in inflammation, swelling, redness and pus formation
- 1105** Chrome ulcers - pitted sores of the skin that are slow or resistant to healing, caused by exposure to chromium salts
- 1107** Other occupational skin diseases or disorders
- 1109** **DEATH resulting from occupational skin diseases or disorders**

Dust Diseases of the Lungs (Pneumoconioses)

- 1111** Silicosis - Hardening of lung tissue caused by inhaling dust

Add Available Codes to Reduce Need for Narratives

- Expanded the Codes in Circumstance Codes (Casualty Reporting)
- Expanded the Cause Codes (Train Accident Reporting)

Circumstance Codes

- New Codes were Added in All Categories
 - Physical Act
 - Location
 - Event
 - Tools, Machinery, Appliances, Structures, etc.
 - Probable Reason

Cause Codes

- Technical Changes
 - Broken Rail
 - Signal (matches with processor-based NPRM)
- Under Active Investigation by Railroad
- Investigation Complete, Cause Could not be Determined

RCL – Related Accidents and Injuries

- Changes in Train Accident Form
- Changes in Highway-Rail Collision Form
- New codes added to Circumstance Codes
- New Job Codes Added

Switching Operations

- Based on SOFA Recommendations
- Added new circumstance codes

Commuter Railroad Reporting

- Condensed the Reporting
- Simplified some of the reporting
- One Chapter Covers Commuter Railroad Special Reporting

Telephonic Notification of Accidents and Fatalities

- Contractor Fatalities
- NTSB Cases
- Reportable collisions and derailments on on passenger route (heightened need for attention by FRA)
- Calls continue to go to National Response Center (also used by NTSB)
- Less than 1 additional call per day industry-wide

Changes to Other Forms

- Form 97 – Added County Code
- Accident/Incident Forms – Notice of not being admitted as evidence
- Other technical changes
- Forms 81 and 78 put into clear language

Occupational Illnesses

- Longstanding concerns by FRA, labor and management regarding issues surrounding “work relatedness”
- Clarification of reporting requirements per OSHA amendments
- When received in extraordinary means – outside standard procedures
- Special form
- Good faith effort to complete form

Coding Job Titles

- When job titles do not conform the the accident report
- A switch foreman is to be included in the "Conductor" count.
- Switch helpers are to be included in the "Brakemen" count.

Collection Geospatial Data

- **Optional entry**
- Applies only to Trespasser Casualties, Employee-on-Duty Fatalities, and Train Accidents
- Forms 6180.54 and 6180.55a were modified
- Grade Crossing Inventory already has latitude/longitude

Next Steps

- Working group consensus on major issues
- Working group is completing NPRM draft
 - final details basically complete
- Full Committee will be requested to review and respond to mail ballot 6/10/02
- Target final rule effective 1/1/03