Municipal Technical Advisory Service
INSTITUTE FOR PUBLIC SERVICE

Published on *MTAS* (https://www.mtas.tennessee.edu) September 23, 2019

Recording and Reporting Work Related Events

Dear Reader:

The following document was created from the MTAS website (mtas.tennessee.edu). This website is maintained daily by MTAS staff and seeks to represent the most current information regarding issues relative to Tennessee municipal government.

We hope this information will be useful to you; reference to it will assist you with many of the questions that will arise in your tenure with municipal government. However, the *Tennessee Code Annotated* and other relevant laws or regulations should always be consulted before any action is taken based upon the contents of this document.

Please feel free to contact us if you have questions or comments regarding this information or any other MTAS website material.

Sincerely,

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Recording and Reporting Work Related Events

Reference Number: MTAS-1491

A work-related injury or illness must be recorded on the OSHA 300 Log if an event or exposure in the work environment either caused or contributed to the resulting condition or significantly aggravated a pre-existing injury or illness. Work-relatedness is presumed for injuries and illnesses resulting from events or exposures occurring in the work environment unless a specific exception exists. 29 C.F.R. § 1904.7(a).

Results in an Employee Death

Reference Number: MTAS-1979

If a work-related injury or illness results in an employee's death, you must record the incident by entering a check mark on the OSHA 300 Log in the space for cases resulting in death. You must also report any work-related fatality to OSHA within eight hours. 29 C.F.R. § 1904.7(b)(2).

Injury or Illness Resulting in Days Away from Work

Reference Number: MTAS-1980

If a work-related injury or illness results in days away from work by the employee, you must record the injury or illness if it involves one or more days away with a check mark in the space for cases involving days away and an entry for the number of calendar days away from work in the number of day's column. If the employee is out for an extended period of time, you must enter an estimate of the days that the employee will be away and update the count when the actual number of days is known. The day the injury or illness occurs is not counted as a day away from work. 29 C.F.R. § 1904.7(b)(3).

Physician Recommendation

Reference Number: MTAS-1981

If a physician or other licensed health care professional recommends that a worker stay home but the employee comes to work anyway, you must record the injury or illness on the OSHA 300 Log using the check box for cases with days away from work and enter the number of calendar days away recommended by the physician. 29 C.F.R. § 1904.7(b)(3)(ii). The days away must be recorded whether the employee follows the physicians recommendation or not, and you must encourage the employee to follow that recommendation. If you receive two or more physician recommendations, you may make a decision as to which recommendation is the most authoritative and record the case based on that recommendation. If a physician recommends that an employee return to work but the employee stays home, you must end the count of days away from work on the date the physician or other licensed health care professional recommends that the employee return to work.

Work-related Injury or Illness Results in Restricted Work

Reference Number: MTAS-1982

When a work-related injury or illness results in restricted work or a job transfer but does not involve death or days away from work, you must record the injury or illness on the OSHA 300 Log by placing a check mark in the space for job transfer or restriction and entering the number of restricted or transferred days in the restricted workday column. 29 C.F.R. § 1904.7(b)(4). Restricted work occurs when, as the result of a work-related injury or illness, you keep the employee from performing one or more of the routine functions of the job, or from working the full workday that the employee would otherwise have been scheduled to work. Restricted work also may occur if a physician or other licensed

health care professional recommends that the employee not perform one or more routine functions of the job or not work the full workday that had been scheduled. Routine functions are those work activities employees regularly perform at least once a week. 29 C.F.R. § 1904.7(b)(4)(i).

As with days away from work, you do not have to record restricted work or job transfers if you, the physician or other health care professional imposes the restriction or transfer only for the day on which the injury or illness began. 29 C.F.R. § 1904.7(b)(4)(iv). Additionally, if a case involves a worker who works only a partial shift because of a work-related injury or illness, the partial day is recorded as a day of job transfer or restriction for record keeping purposes, except for the day on which the injury occurred or the illness began. 29 C.F.R. § 1904.7(b)(4)(v).

Both job transfer and restricted work cases are recorded in the same box on the OSHA 300 Log. You must count days of job transfer or restrictions in the same way that days away from work are counted. 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 becomes permanent. You must count at least one day of restricted work or job transfer for such cases. 29 C.F.R. § 1904.7(b)(4)(xi).

Generally, employers must count the number of calendar days the employee is unable to work as a result of an injury or illness, regardless of whether or not the employee was scheduled to work on those days. Weekends, holidays, vacation days or other days off are included in the total number of days recorded if the employee would not have been able to work on those days because of the work-related injury or illness. 29 C.F.R. § 1904.7(b)(3)(iv).

If an employee is injured or becomes ill on a Friday and reports to work on a Monday, and was not scheduled to work on the weekend, you should record this case only if information is received from a physician indicating that the employee should not have worked, or should have performed only restricted work, during the weekend. If so, you must record the injury or illness as a case with days away from work or restricted work and enter the day count, as appropriate. 29 C.F.R. § 1904.7(b)(3)(v). If an employee is injured or becomes ill on the day before scheduled time off, such as a holiday or planned vacation, the same procedures should be followed. 29 C.F.R. § 1904.7(b)(3)(vi).

Total Number of Days Away from Work

Reference Number: MTAS-1983

The total number of days away from work may be capped at 180 calendar days. Employers are not required to keep track of the number of days away from work if the injury or illness lasts more than 180 days. In such a case, entering 180 in the total days away column will be considered adequate. 29 C.F.R. § 1904.7(b)(3)(vii). Additionally, if an employee who is away from work because of a work-related injury or illness retires or leaves the company, you may stop counting days if the reason for leaving is unrelated to the injury or illness. If, however, the employee leaves the company because of the injury or illness, you must estimate the total number of days away or days of restricted/job transfer and enter the day count on the 300 Log. 29 C.F.R. § 1904.7(b)(3)(viii).

In situations where a case occurs in one year but results in days away during the next calendar year, you must record the injury or illness only once. You must enter the number of calendar days away for the injury or illness on the OSHA 300 Log for the year in which the injury or illness occurred. If the employee is still away from work when you prepare the annual summary, you must estimate the total number of calendar days the employee is expected to be away, use that number to calculate the total for the annual summary, and then update the initial log entry later when the day count is known or reaches the 180-day cap. 29 C.F.R. § 1904.7(b)(3)(ix).

Medical Treatment Beyond First Aid

Reference Number: MTAS-1984

If a work-related injury or illness results in medical treatment beyond first aid, you must record it on the OSHA 300 Log. If the injury or illness did not result in death, days away from work, or restricted work or a job transfer, you must check the box for cases where the employee received medical treatment but

remained at work and was not transferred or restricted (other recordable cases). 29 C.F.R. § 1904.7(b)(5). An example is a case in which the employee is involved in an accident and is taken to the hospital to have a cut stitched, then returns to work the next day. The employee would have received medical treatment but would not have a lost day of work, restricted work or a job transfer.

Medical treatment means the management and care of a patient to combat disease or disorder. It does not include visits to a physician or other licensed health care professional solely for observation or counseling; conducting diagnostic procedures, such as X-rays and blood tests; the administration of prescription medication used solely for diagnostic purposes (e.g., eye drops to dilate pupils); or first aid. 29 C.F.R. § 1904.7(b)(5)(i).

First aid means the following: 29 C.F.R. § 1904.7(b)(5)(i).

- Using a non-prescription medication at nonprescription strength. (If a physician or licensed health care provider directs use of a nonprescription medication at prescription strength, it is considered medical treatment.)
- Administering tetanus immunizations. (Other immunizations, such as hepatitis B vaccines or rabies vaccines, are considered medical treatment.)
- Cleaning, flushing or soaking wounds on the surface of the skin.
- Using wound covering such as bandages, Band-Aids™, gauze pads, etc.; or using butterfly bandages or Ster-Strips.™ (Other wound closing devices such as sutures, staples, etc., are considered medical treatment for recordkeeping purposes.)
- Using hot or cold therapy.
- Using any non-rigid 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 for record keeping purposes.)
- Using temporary immobilization devices while transporting an accident victim (e.g., splints, slings, neck collars, back boards, etc.).
- Drilling 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 and chiropractic treatments are considered medical treatment for record keeping purposes.)
- Drinking fluids for relief of heat stress.

29 C.F.R. § 1904.7(b)(5)(v) provides that if a physician or other licensed health care professional recommends medical treatment and the employee does not follow the physician's recommendation, you must still record the case. As previously stated, you should encourage the employee to follow the recommendation.

Loss of Consciousness

Reference Number: MTAS-1985

If a work-related injury or illness results in loss of consciousness, you must record the work-related injury or illness, regardless of the length of time the employee remains unconscious. 29 C.F.R. § 1904.7(b)(6). Additionally, work-related cases involving a significant diagnosed injury or illness (such as cancer, chronic irreversible diseases, a fractured or cracked bone, or a punctured eardrum) must always be recorded under the general criteria at the time of diagnosis. OSHA considers these types of injuries or illnesses recordable even if medical treatment or work restrictions are not recommended or are postponed. 29 C.F.R. § 1904.7(b)(7).

Exposure to Blood/Infectious Material

Reference Number: MTAS-1986

OSHA regulation (29 C.F.R. § 1904.8) requires employers to record all work-related needle stick injuries and cuts from sharp objects that are contaminated with another person's blood or other potentially infectious materials as defined by 29 C.F.R. § 1910.1030. Other potentially infectious materials include human bodily fluids, tissues and organs; and other materials infected with the HIV or hepatitis B (HBV) virus, such as laboratory cultures or tissues from experimental animals. 29 C.F.R. § 1904.8(b)(1). You must enter the case on the OSHA 300 Log as an injury. To protect the employee's privacy, you may not enter the employee's name on the OSHA 300 Log. If a recorded injury results in a later diagnosis of an infectious blood borne disease, you must update the classification of the case on the OSHA 300 Log if it results in death, days away from work, restricted work, or job transfer. You must also update the description to identify the infectious disease and change the classification of the case from an injury to an illness.

If an employee is splashed or exposed to blood or other potentially infectious material without being cut or scratched, you must record the incident on the OSHA 300 Log as an illness if it results in the diagnosis of a blood borne illness such as HIV, hepatitis B or hepatitis C; or if it results in death, days away from work, work restrictions, or job transfer. Otherwise it is not recorded. 29 C.F.R. § 1904.8(b)(4).

You are not required to record all cuts, lacerations, punctures and scratches. Only those injuries that are work-related and involve contamination with another person's blood or other potentially infectious materials must be recorded. If a cut, laceration or scratch involves a clean object or a contaminant other than blood or other potentially infectious material, you need to record the case only if it results in death, days away from work, work restrictions, job transfer, medical treatment, or loss of consciousness. 29 C.F.R. § 1904.8(b)(2).

Medical Removal Under Medical Surveillance

Reference Number: MTAS-1987

If an employee is medically removed (transferred to a hospital) under the medical surveillance requirement of an OSHA standard, you must record the case on the OSHA 300 Log. 29 C.F.R. § 1904.9(a). The case would be entered as either a case involving days away from work or a case involving restricted work activities. If the medical removal is the result of a chemical exposure, you must enter the case on the OSHA 300 Log by checking the poisoning column. 29 C.F.R. § 1904.9(b)(1). If you voluntarily remove an employee from exposure before the medical removal criteria in an OSHA standard is met, the case need not be recorded. 29 C.F.R. § 1904.9(b)(3).

Exposure to Tuberculosis (TB)

Reference Number: MTAS-1988

If any employee becomes occupationally exposed to anyone with a known case of active tuberculosis (TB), and the employee subsequently develops a tuberculosis infection, the case must be recorded on the OSHA 300 Log by checking the respiratory condition column. 29 C.F.R. § 1904.11(a). Before the event is entered on the log, you should have a record of a positive skin test or a diagnosis by a physician or other licensed health care professional in hand.

You do not have to record the case if it can be determined that the employee was not occupationally exposed to a known case of active tuberculosis at the workplace. The case can be removed from the Log if you obtain evidence that the worker is living in a household with a person who has been diagnosed with active TB; the public health department has identified the worker as a contact of an individual with a case of active TB unrelated to the workplace;or a medical investigation shows that the employee's infection was caused by exposure to TB away from work, or proves that the case was not related to the workplace TB exposure. 29 C.F.R. § 1904.11(b).

Hearing Loss

Reference Number: MTAS-1989

If a work-related injury or illness results in a hearing loss, the employee is required to record, by checking the "hearing loss" column on the OSHA 300 Log, all cases in which an employee's hearing test (audiogram) revealed that a Standard Threshold Shift (STS) in hearing acuity had occurred. 29 C.F.R. § 1904.10(a). An STS is defined in 29 C.F.R. § 1904.10(b)(1) as "a change in hearing threshold, relative to the most recent audiogram for that employee, of an average of 10 decibels or more at 2000, 3000 and 4000 Hertz (Hz) in one or both ears."

The recordkeeping rule itself does not require the employer to test employee's hearing. However, OSHA's occupational noise standard (29 C.F.R. § 1910.95) requires employers in general industry to conduct periodic audiometric testing of employees when employees' noise exposures are equal to, or exceed, an 8-hour time-weighted average of 85dBA. Under the provisions of § 1910.95, if such testing reveals that an employee has sustained a hearing loss equal to an STS, the employer must take protective measures, including requiring the use of hearing protectors, to prevent further hearing loss. Employers in the construction, agriculture, oil and gas drilling and servicing, and shipbuilding industries are not covered by § 1910.95, and therefore are not required by OSHA to provide hearing tests. If employers in these industries voluntarily conduct hearing tests they are required to record hearing loss cases meeting the recording criteria set forth in the final Section 1904.10 rule.
