THE UNIVERSITY of TENNESSEE
MUNICIPAL TECHNICAL ADVISORY SERVICE

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OSHA CHANGES FORMS AND PROCEDURES FOR REPORTING OCCUPATIONAL INJURIES AND ILLNESSES

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INTRODUCTION AND OVERVIEW

On January 1, 2002, new Occupational Safety and Health Administration (OSHA) recordkeeping rules (29 CFR Part 1904 – Recording and Reporting Occupational Injuries and Illnesses) went into effect. The new Code signals an overhaul of the old system and the implementation of new guidelines to provide more flexibility to employers in reporting injuries and illnesses. The new statutes change many of the old rules regarding coverage, recording criteria, needlesticks, employee involvement, privacy protection and centralized records.

The revised regulations require employers, subject to the rules, to record and report work-related fatalities, injuries and illnesses. The act also prohibits employers from discriminating against an employee for reporting a work-related fatality, injury or illness. The provisions protect the employee who files a safety and health complaint, asks for access to records, or otherwise exercises any rights afforded by the act. Compliance with the rules does not imply that an employer or employee is at fault, that an OSHA rule has been violated, or that the employee is eligible for workers' compensation or other benefits.

SCOPE AND COVERAGE

All employers covered by OSHA are covered by the recording and reporting provisions of the act; however, not every employer must keep OSHA injury and illness records. A partial exemption is available based on the number of employees in the entire organization. Employers with ten (10) or fewer employees during the previous calendar year do not need to keep OSHA injury and illness records unless otherwise required by OSHA or the Bureau of Labor Statistics (BLS). Nevertheless, they must report to OSHA any workplace incident that results in a death or the hospitalization of three (3) or more employees.

Employers with more than ten (10) employees at any time during the last calendar year must keep OSHA injury and illness records unless the establishment is classified as a partially exempt industry. A partial exemption is available for establishments in certain low hazard retail, service, finance, insurance or real estate industries. Unfortunately, government services, except schools and universities, are not classified as partially exempt industries. Establishments in agriculture, mining, construction, manufacturing, transportation, communication, electric, gas and sanitary services are not eligible for the partial industry exemption.

Employers subject to the recordkeeping provisions of the act must record any work-related fatality, injury or illness of all employees on the payroll that meets the recording criteria established by the act, whether they are labor, executive, hourly, salaried, part-time, seasonal, or migrant workers. You must also record the recordable injuries and illnesses that occur to

employees who are not on your payroll (as a result of leasing or a temporary employment service) if you supervises them on a day-to-day basis. Self-employed individuals are not covered by the OSH Act or these regulations.

RECORDING CRITERIA

The new regulations require employers to record all fatalities, injuries and illnesses that are work-related or that are new cases resulting in:

- Death;
- Days away from work;
- Restricted work or transfer to another job;
- Medical treatment beyond first aid;
- Loss of consciousness;
- Needlestick injuries;
- Cuts from sharp objects that are contaminated with another person's blood or other potentially infectious material;
- Medical removal under OSHA standards;
- Hearing loss;
- Tuberculosis (TB);
- Muscular skeletal disorders (MSD); or
- A significant injury or illness diagnosed by a physician or other licensed health care professional.

An injury or illness is work-related 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. The work environment is defined as "the establishment and other locations where one or more employees are working or are present as a condition of employment." The work environment includes not only the physical location, but also the equipment or materials used by the employee during the course of his/her workday. An injury or illness is considered pre-existing if it resulted solely from a non-work-related event or exposure that occurred outside the work environment.

The act deems a pre-existing injury or illness "significantly aggravated" if the event results in death, loss of consciousness, one or more days away from work, days of restricted work, days of job transfer, or medical treatment. A case is considered "significantly aggravated" when no medical treatment was needed for the injury or illness before the workplace event or exposure or when a change in medical treatment was necessitated by the workplace event or exposure if the condition's aggravation would likely not have resulted but for the occupational event or exposure.

Employers do not have to record injuries or illnesses under the following conditions:

1. At the time of the injury or illness, the employee was present in the work environment as a member of the general public.
2. The injury or illness involves signs or symptoms that surface at work but that result solely from a non-work-related event or exposure that occurs outside the work environment.
3. The injury or illness results solely from voluntary participation in a wellness program or in a medical, fitness, or recreational activity such as blood donation, physical examination, flu shot, exercise class, racquetball, or baseball.
4. The injury or illness is solely the result of an employee eating, drinking, or preparing food or drink for personal consumption (whether bought on your premises or brought in). For example, if

the employee is injured by choking on a sandwich while in your establishment, the case would not be considered work-related. However, if an employee was preparing a meal for a business-related meeting and is injured, the case would be considered work-related.

5. The injury or illness is solely the result of an employee doing personal tasks (unrelated to employment) at the establishment outside the employee's assigned working hours.
6. The injury or illness is solely the result of personal grooming or self medication for a non-work-related condition, or is intentionally self-inflicted.
7. The injury or illness is caused by a motor vehicle accident and occurs on a company parking lot or company access road while the employee is commuting to or from work.
8. The injury is the common cold or flu. Contagious diseases such as tuberculosis, brucellosis, hepatitis A, or plague are considered work-related if the employee is infected at work.
9. The illness is a mental illness unless the employee voluntarily provides you with an opinion from a physician or other licensed health care professional with the appropriate training and experience stating that the employee has a mental illness that is work-related.

In situations where you have difficulty determining whether the precipitating event or exposure occurred in the work environment or away from work, you must evaluate the employee's work duties and environment to determine whether one or more events or exposures in the work environment either caused or contributed to the resulting condition or significantly aggravated a pre-existing condition.

Injuries and illnesses that occur while an employee is traveling are work-related if, at the time of the injury or illness, the employee was engaged in work activities "in the interest of you." Examples include travel to and from customer contacts; conducting job tasks; and entertaining or being entertained to transact, discuss, or promote business at the direction of you. Injuries and illnesses that occur when the employee is traveling do not have to be recorded if the employee has checked into a hotel or motel for one or more days or has taken a detour for personal reasons.

Injuries and illnesses that occur while an employee is working at home will be considered work-related if the injury or illness occurs while the employee is performing work for pay or commission in the home, and the injury or illness is directly related to the performance of the work rather than to the general home environment or setting. If an employee drops a box of work documents and injures his/her foot, the case is considered work-related. If an employee is injured because he/she trips on the family dog while rushing to answer a work phone call, the case is not considered work-related. If the employee is electrocuted because of faulty home wiring, the injury is not work-related.

Employers must consider an injury or illness a "new case" if (1) the employee has not previously experienced a recorded injury or illness of the same type that affected the same part of the body or (2) the employee previously experienced a recorded injury or illness of the same type that affected the same part of the body but had recovered completely from the previous injury or illness and an event or exposure in the work environment caused the signs or

symptoms to reappear. An employee has recovered completely when all signs or symptoms have disappeared. Occupational illnesses in which the signs or symptoms may recur or continue in the absence of an exposure in the workplace are only recorded once. Employers are not required to seek the advice of a physician or other licensed health care provider to determine whether a case is a new case or a recurrence of an old case. However, if you do seek the advice, you must follow the physician's recommendations.

FORMS

OSHA has completely revised all forms used to report occupational injuries and illnesses. The OSHA 200 – Log and Summary and the OSHA 101 – Supplemental Record have been replaced by the OSHA 300 – Log of Work-Related Injuries and Illnesses, OSHA 300A – Summary of Work-Related Injuries and Illnesses, and the OSHA 301 – Injury and Illness Incident Report.

To complete the OSHA 300 Log, you must enter information about the business at the top of the form. Then, you must enter a one- or two-line description for each recordable injury or illness and summarize this information on the OSHA 300A at the end of the year. The OSHA 301 Incident Report, or an equivalent form, must be completed for each recordable injury or illness entered on the OSHA 300 Log.

Recordable injuries and illnesses must be entered on the OSHA 300 Log and the 301 Incident Report or equivalent form within seven (7) calendar days of receiving information that an injury or illness has occurred. An equivalent form is one that has the same information, is as readable and understandable, and is completed using the same instructions as the OSHA form it replaces. If a computer can produce equivalent forms when they are needed, you may keep records on the computer system.

There may be situations in which the employee's name is not put on the OSHA 300 Log. These are "privacy concern cases" and you are obligated to protect the privacy of the injured or ill employee when another employee, former employee, or an authorized employee representative is provided access to the OSHA Log. Employers must keep a separate, confidential list of the case numbers and employee names for the privacy concern cases so they can be updated and provided to government officials as needed. (Privacy concern cases will be discussed in more detail on page FILL IN PAGE NUMBER).

RECORDING AND REPORTING WORK-RELATED EVENTS AND NEW CASES

As previously mentioned, a work-related injury or illness must be recorded when it results in death, days away from work, restricted work, a transfer to another job, medical treatment beyond first aid, loss of consciousness, needlestick injuries, cuts from sharp objects that are contaminated with another person's blood or other potentially infectious material, medical removal under OSHA standards, hearing loss, tuberculosis (TB), muscular skeletal disorders (MSD), or a significant injury or illness diagnosed by a physician or other licensed health care professional.

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 (8) hours.

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 the work.

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. 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.

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. 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.

As with days away from work, you do not have to record restricted work or job transfers if you, physician or other health care professional imposes the restriction or transfer only for the day on which the injury or illness began. 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 recordkeeping purposes, except for the day on which the injury occurred or the illness began.

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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.

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.

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. 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.

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. 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.

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.

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). 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.

First aid means the following:

1. Using a non-prescription medication at non-prescription strength. (If a physician or licensed health care providers directs use of a non-prescription medication at prescription strength, it is considered medical treatment.);
2. Administering tetanus immunizations. (Other immunizations, such as hepatitis B vaccines or rabies vaccines, are considered medical treatment.);
3. Cleaning, flushing or soaking wounds on the surface of the skin.;
4. 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 record keeping purposes.);
5. Using hot or cold therapy;
6. 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 recordkeeping purposes.);
7. Using temporary immobilization devices while transporting an accident victim (e.g., splints, slings, neck collars, back boards, etc.);
8. Drilling a fingernail or toenail to relieve pressure, or draining fluid from a blister
9. Using eye patches;
10. Removing foreign bodies from the eye using only irrigation or a cotton swab;
11. Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means;
12. Using finger guards;
13. Using massages (Physical therapy and chiropractic treatments are considered medical treatment for recordkeeping purposes.) ;
14. Drinking fluids for relief of heat stress;

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.

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. 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

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treatment or work restrictions are not recommended or are postponed.

OSHA regulations also require employers to record all work-related needlestick injuries and cuts from sharp objects that are contaminated with another person's blood or other potentially infectious materials. 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. 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.

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.

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. 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. 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.

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. 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.

PRIVACY CONCERN CASES

OSHA recognizes that there may be situations in which you do not want to put the employee's name on the OSHA 300 Log for privacy reasons. If that is the case, you may enter the words "privacy case" in the space normally used for the employee's name. You must keep a separate, confidential list of the case numbers and employee names in order to update the case and provide the information to the government if requested. The following injuries or illnesses must be considered "privacy concern cases:"

1. An injury or illness to an intimate body part or the reproductive system;
2. An injury or illness resulting from a sexual assault;
3. Mental illness;
4. HIV infection, hepatitis or tuberculosis;
5. Needlestick injuries and cuts from sharp objects that are contaminated with another person's blood or other potentially infectious material; and
6. Other illnesses if the employee independently and voluntarily requests that his/her name not be entered on the Log.

If you have reason to believe that the employee may be identified from the information on the form, you may use discretion in describing the injury or illness on both the OSHA 300 and 301 forms, even if the employee's name has been omitted. Enough information, however, must be included to identify the cause of the incident and the general severity of the injury or illness, but you need not include details of an intimate or private nature (e.g., a sexual assault case could be described as an "injury from assault," or an injury to a reproductive organ could be described as a "lower abdominal injury").

If you disclose the OSHA forms to anyone other than government representatives, employees, former employees or authorized representatives, you must remove or hide the employee's name and other personally identifying information, except in the following cases:

1. Disclosure to an auditor or consultant hired by you to evaluate the safety and health program;
2. Disclosure to the extent necessary for processing a claim of workers' compensation or other insurance benefit; or
3. Disclosure to a public health authority or law enforcement agency for uses and disclosure for which consent, an authorization, or opportunity to agree or object is not required under the Department of Health and Human Services Standards for Privacy of Individually Identifiable Health Information.

REPORTING FATALITIES AND MULTIPLE HOSPITALIZATION INCIDENTS TO OSHA

Within eight (8) hours after the death of any employee from a work-related incident or the in-patient hospitalization of three (3) or more employees as the result of a work-related incident, you must orally report the fatality/multiple hospitalization by telephone or in person to the Area Office of the Occupational Safety and Health Administration, U.S. Department of Labor, that is nearest the site of the incident. Employers also may

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use the OSHA toll-free central telephone number, 1-800-321-6742 (1-800-321-OSHA). If the Area Office is closed, employers may not leave a message on OSHA's answering machine, fax the Area Office, or send an e-mail, but must call the toll-free number for the U.S. Department of Labor OSHA office.

In reporting a fatality or multiple hospitalizations, you must give OSHA the following information:

1. Establishment name;
2. Location of the incident;
3. Time of the incident;
4. Number of fatalities or hospitalized employees;
5. Names of any injured employees;
6. A contact person for you and his/her phone number; and
7. A brief description of the incident.

If you do not learn about a reportable incident right away, you must make the report within eight (8) hours of the time the incident is reported. If the report is not made within 30 days of the incident, you do not have to report the fatality or hospitalization.

As with other rules, there are exceptions. Employers do not have to report all incidents involving fatalities and multiple hospitalizations resulting from a motor vehicle accident. If the motor vehicle accident occurs on a public street or highway and does not occur in a construction work zone, the incident does not have to be reported to OSHA. The injuries, however, must be recorded on the OSHA injury and illness record, if you are required to keep such a record (death, loss of days, restricted duties, transfer, etc.).The same rules apply to incidents involving commercial airplane, train, subway or bus accidents.

ANNUAL SUMMARY

At the end of each calendar year, you must review the OSHA 300 Log to verify that the entries are complete and accurate, and must correct any deficiencies identified. You must also create an annual summary of injuries and illnesses recorded on the OSHA 300 Log by filling out the 300A, certify the summary, and post it for public review.

To complete the annual summary, you must total the columns on the OSHA 300 Log and enter the calendar year covered, any identifying information about the company, the annual average number of employees covered by the OSHA 300 Log, and the total hours worked by all the employees covered by the OSHA 300 Log. If an alternate summary form is used, it must contain the employee access and employer penalty statement found on the OSHA 300-A form.

The form must be certified by a municipal executive indicating that he/she has examined the OSHA 300 Log and that he/she reasonably believes that the summary is correct and complete. The municipal executive must be an elected official, the highest ranking official working at the municipality or the immediate supervisor of the highest ranking city/town official.

OSHA 300 Logs, the privacy case list, the annual summary, and the OSHA 301 Incident Report form must be saved for five (5) years following the end of the calendar year that the records cover. During the period of storage, you must update the stored OSHA 300 Log to include newly discovered recordable injuries and illnesses and to show any changes that occurred in the classification of previously recorded

injuries and illnesses. If the description or outcome changes, you must remove or line through the original entry and then enter the new information. The annual summary and the OSHA 301 Incident Reports do not have to be updated.

You must post a copy of the annual summary in each establishment in a conspicuous place where notices to employees are customarily posted. The posted annual summary must not be altered, defaced or covered by other material. The summary must be posted no later than February of the year following the year covered by the records and kept at the posting place until April.

EMPLOYEE INVOLVEMENT

The new OSHA recordkeeping standard requires that employees and their representatives be involved in the recordkeeping system in several ways. You must inform each employee of how he/she is to report an injury or illness and must provide limited access to the injury and illness records for employees and their representatives. A personal representative of an employee or former employee is any person whom the employee or former employee designates in writing as such, or the legal representative of a deceased or legally incapacitated employee or former employee.

If an employee or representative asks for access to the OSHA 300 Log and/or the OSHA 301 Incident Report, you must give the requester a copy of the relevant Log and Incident Report by the end of the next business day. If the authorized employee representative asks for copies of the OSHA 301 Incident Report, you must give copies of those forms within seven (7) calendar days. You are authorized to give the representative only information from the Incident Report section titled "Tell us about the case." You must remove all other information from the copy of the OSHA 301 form.

You may not charge for copies the first time they are provided. If one of the designated persons asks for additional copies, you may assess a reasonable charge for retrieving and copying the records.

PROVIDING RECORDS TO GOVERNMENT REPRESENTATIVES

When an authorized government representative asks to review the records of the city/town, you must provide copies of the records within four (4) business hours. Government representatives authorized to receive the records are:

1. A representative of the Secretary of Labor conducting an inspection or investigation under the act;
2. A representative of the Secretary of Health and Human Services (including the National Institute for Occupational Safety and Health – NIOSH) conducting an investigation; and
3. A representative of a state agency responsible for administering a state plan approved under the act (TOSHA).

Annually, the OSH Administration sends surveys to organizations in certain industries. If you receive such a survey, you must respond to the survey within 30 days or by the date stated in the survey. Additionally, the Bureau of Labor Statistics may periodically send out an Occupational Injuries and Illnesses Survey, which must be completed and returned promptly.

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IF YOU NEED HELP

For more information about the new OSHA recordkeeping provision, contact your municipal management consultant or Richard L. Stokes, PHR, IPMA-CP or Bonnie Jones, municipal human resource management consultants, at (615) 532-6827. If you need help deciding if a case is recordable, or if you have questions about the act, you may visit OSHA online at http://www.osha.gov/recordkeeping/index.html, call the regional office at (415) 975-4310, or contact TOSHA at (615) 741-2793.

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