

## Recording and posting work-related incidents

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**OAR 437  
Division 1**

### Recording work-related incidents

If your organization had **more than 10 employees** at any time during the last calendar year and is not in a designated\* retail, service, finance, insurance, or real estate industry, you must keep the following injury and illness records.

- Worker's and Employer's Report of Occupational Injury or Disease (DCBS Form 801).
- Log of Work-Related Injuries and Illnesses (OSHA Form 300).
- Summary of Work-Related Injuries and Illnesses (OSHA Form 300A).

\* Look for a complete list of the designated industries that are not required to keep injury and illness records in Table – 1 Partially exempt industries, in Oregon OSHA's Recordkeeping and Reporting Rule (OAR 437-001-0700).

If your organization never had more than 10 employees at any time during the last calendar year you do not need to keep the **OSHA 300** or **300A** forms, but you must keep DCBS Form 801 for five years.

**Retail, service, finance, insurance, or real estate** industries or organizations do not need to keep the **OSHA 300** or **300A** forms, but you must keep **DCBS Form 801** for five years.

**Hospitals and ambulatory surgical centers** must keep a log of health care assaults that complies with Oregon OSHA's Recordkeeping for **Health Care Assaults Rule** (OAR 437-001-0706).

### Posting the OSHA 300A

If you must maintain an **OSHA 300 Log**, fill out the **OSHA 300A** Summary of Work-Related Injuries and Illnesses, or an equivalent form, to create an annual summary of injuries and illnesses recorded on the **OSHA 300 Log**, at the end of each calendar year.

The highest ranking manager at the location where the log was compiled must review and certify (sign and date) that the document entries are true, accurate, and complete to the best of their knowledge. If there is no management at the compiling location, the review and certification must be done by the manager with jurisdiction over that location.

You must post a copy of each establishment's annual summary 300A in a conspicuous place no later than

**Report of Job Injury or Illness**  
Workers' compensation claim

**Worker**

To make a claim for a work-related injury or illness, fill out the worker portion of this form and give to your employer. If you do not intend to file a workers' compensation claim with the insurance company, do not sign the signature line. Your employer will give you a copy.

**Employer**

Complete the rest of this form and give a copy of the form to the worker. Notify your workers' compensation insurance company within five days of knowledge of the claim. Even if the worker does not work to file a claim, maintain a copy of this form.

**OSHA requirements:** On the job fatalities and catastrophes must be reported to OSHA within eight hours. OSHA also requires that employers that result in a workplace fatality or a workplace catastrophe file an OSHA 300 Log case #.

**801**

**OSHA's Form 300**  
Log of Work-Related Injuries and Illnesses

Establishment name: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Identify the person	Describe the case	Classify the case	
		OSHA 300 Log case #	OSHA 300 Log case #
1. Name	2. Date	3. Injury or illness	4. Days away from work
5. Job title	6. Description of injury or illness	7. OSHA 300 Log case #	8. OSHA 300 Log case #

Page totals: \_\_\_\_\_

**OSHA Form 300A**  
Summary of Work-Related Injuries and Illnesses

Establishment information

Your establishment name: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Industry description (e.g., manufacturer of motor truck trailers) \_\_\_\_\_

Standard Industrial Classification (SIC) if known (e.g., SIC 3716) \_\_\_\_\_

Employment information (If you don't have these figures, see the worksheet on the back of this page to estimate.)

Annual average number of employees \_\_\_\_\_

Total hours worked by all employees last year \_\_\_\_\_

Sign here

I certify that I have examined this document and result to the best of my knowledge, the entries are true, accurate, and complete.

Company executive \_\_\_\_\_ Title \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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The summary must be posted at the location where the injury or illness occurred. In cases where the employees are mobile, the summary may be posted at a headquarters where employees regularly report to work.

### Paperwork retention and updating

OSHA 300s, OSHA 300As, and 801 forms must be retained and updated as necessary for five years following the end of the calendar year that they cover.

If the establishment no longer exists, you must still have a separate **OSHA 300A** summary and it must be maintained for the requisite five years along with the **OSHA 300 Log** for that establishment.

### Rules:

**Recordkeeping and Reporting:** OAR 437-001-0700

**Rules for all Workplaces:** OAR 437-001-0760

**Recordkeeping for Health Care Assaults:** OAR 437-001-0706

### Program directives:

**Inspection Criteria:** *Temporary Employment and Leasing Agencies* (A-246)

### Links to forms, rules, and program directives:

OSHA 300 and 300A forms

[www.osha.org/pdf/pubs/3353.pdf](http://www.osha.org/pdf/pubs/3353.pdf)

**Recordkeeping and Reporting:** OAR 437-001-0700

[www.osha.org/pdf/rules/division\\_1/437-001-0700-0742.pdf](http://www.osha.org/pdf/rules/division_1/437-001-0700-0742.pdf)

**Rules for all Workplaces:** OAR 437-001-0760

[www.osha.org/pdf/rules/division\\_1/437-001-0760.pdf](http://www.osha.org/pdf/rules/division_1/437-001-0760.pdf)

**Recordkeeping for Health Care Assaults:** OAR 437-001-0706

[www.osha.org/pdf/rules/division\\_1/437-001-0706.pdf](http://www.osha.org/pdf/rules/division_1/437-001-0706.pdf)

**Inspection Criteria:** *Temporary Employment and Leasing Agencies* (A-246)

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