CONTRACTOR'S REPORT OF RECORDABLE INJURY/ILLNESS

Refer to Section 2 of Construction Safety Standards

Each work related fatality and injury/illness (first aid cases excepted), shall be reported on this form. The completed form will be submitted to the contracting officer's representative within 3 working days from the date of the incident or onset of illness. Responsibility for completion and submission of this form for all onsite injuries/illnesses to contractor, subcontractor, or supplier forces rests with the prime contractor. All form terms are as defined on the reverse side.

CONTRACT SPECIFICATIONS (Number and Feature)					DAT	E OF THIS REPORT
EMPLOYER						
INJURED EMPLOYEE'S NAME				SOCIAL SECURIT	Y NO.	OCCUPATION
AGE DATE E	EMPLOYED DATES OF PREV			VIOUS INJURIES		
DESCRIBE INJURY/ILLNESS						
DATE OF INJURY TI			ATTENDI	NG PHYSICIAN		NJURY CLASSIFICATION MEDICAL ONLY OTHER
STARTED LOSING TIME (Never Date of Injury)				DID INJURY RESULT IN DEATH OR PROBABLE PERMANENT DISABILITY?		
RETURN TO WORK (Date)*				DATE OF DEATH		
WORKDAYS LOST TIME*				DAYS OF RESTRICTED WORK OR TRANSFER TO OTHER JOB		
*Estimate date of return to full duty to avoid delay in submitting report (see reverse side for estimating instructions)						
DESCRIBE ACCIDENT (include Who, What, When, Where, and How)						
HOW COULD ACCIDENT HAVE BEEN PREVENTED?						
SUPERVISORY OPINION						
(Signature)						
FOREMAN OR IMMEDIATE SUPERVISOR ACTION TAKEN TO PREVENT A RECURRENCE						TE SUPERVISOR
	ACTION TAKEN	I TO PRI	EVENT A RECUI	RRENCE		
PREVENTIVE ACTION TAKEN						
			(6:	gnature)		
	PROJECT MANAGER OR SUPERINTENDE					

(NOTE: Information in this report is to be used for the prevention of accidents and is not intended as a basis for injury claims, Recordable injuries/illnesses and workdays lost and injury classification shall be as defined on reverse side of this form.)

Bureau of Reclamation

DEFINITION OF TERMS

Work-related injury/illness: All injuries/illnesses to contractor, subcontractor or supplier employees that result from an event or exposure on any contractor controlled worksite associated with the respective contract.

Medical Cases: Injuries/Illnesses are defined as medical cases if (1) they can be treated only by a physician or licensed medical personnel, (2) they result in damage or harm to physical structure of a nonsuperficial nature (e.g. hairline fractures), (3) they impair bodily functions (i.e. normal use of senses, limbs, etc.), (4) they involve complications requiring followup medical treatment.

The following are generally considered medical treatment:

- Treatment of INFECTION
- Application of ANTISEPTICS during second or subsequent visits to medical personnel
- Treatment of SECOND OR THIRD DEGREE BURN(S)
- Application of BUTTERFLY ADHESIVE DRESSING(S) or STERISTRIPS in lieu of sutures.
- Application of SUTURES (stitches)
- Removal of FOREIGN BODIES EMBEDDED IN EYE
- Removal of FOREIGN BODIES from wound; if procedure is COMPLICATED because of depths of embedment, size or location
- Use of PRESCRIPTION MEDICATIONS (except in a single dose administered on first visit for minor injury or discomfort)
- Use of hot or cold SOAKING THERAPY during second or subsequent visit to medical personnel
- Application of hot or cold COMPRESS(ES) during second or subsequent visits to medical personnel
- CUTTING AWAY DEAD SKIN (surgical debridement)
- Application of HEAT THERAPY during second or subsequent visit of medical personnel
- Use of WHIRLPOOL BATH THERAPY during second or subsequent visit of medical personnel
- POSITIVE X-RAY DIAGNOSIS (fractures, broken bones, etc.)
- ADMISSION TO A HOSPITAL or equivalent medical facility for treatment or prolonged observation.

First Aid Cases: Cases (1) limited to one-time treatment and subsequent observation and (2) involve treatment of only minor injuries, not emergency treatment of serious injuries. Further, any one-time treatment and followup visit for the sole purpose of observation of minor scratches, cuts, burns, splinters, and so forth, which do not ordinarily require medical care are classified as first aid treatment. Such one-time treatment and followup visit for the purpose of observation is considered first aid even though provided by a physician or registered professional personnel. Visits to a doctor for an examination or other diagnostic procedure to determine whether the employee has an injury is classified as a first aid case if no injury is discovered or medical treatment is rendered. Conversely, if treatment is described and medical care is provided even by someone other than a physician or registered medical personnel, injury is classified as medical. Other examples of first aid cases not requiring reporting unless they result in loss of consciousness, restriction of work, or motion, or transfer to another job are:

- Application of ANTISEPTIC during first visit to medical personnel
- Treatment of FIRST DEGREE BURN(S)
- Application of BANDAGE(S) during first visit to medical personnel
- Use of ELASTIC BANDAGE(S) during first visit to medical personnel.
- Removal of FOREIGN BODIES NOT EMBEDDED IN EYE if only irrigation is required
- Removal of FOREIGN BODIES from wound. If procedure is UNCOMPLICATED, and is, for example, by tweezers or other simple technique
- Use of NONPRESCRIPTION MEDICATIONS and administration of single dose of PRESCRIPTION MEDICATION on first visit for minor injury or discomfort
- SOAKING THERAPY ON INITIAL VISIT to medical personnel or removal of bandages by SOAKING
- Application of hot or cold COMPRESS(ES) during first visit to medical personnel
- Application of OINTMENTS to abrasions to prevent drying or cracking

 Application of HEAT THERAPY during first visit to medical personnel.

- Use of WHIRLPOOL BATH THERAPY during first visit to medical personnel.
- NEGATIVE X-RAY DIAGNOSIS
- BRIEF OBSERVATION of injury during visit to medical personnel.

Note: The administration of a **TETANUS SHOT** or **BOOSTER**, by Itself, is not considered medical treatment. However, these shots are often given in conjunction with the more serious injuries. Therefore, injuries requiring tetanus shots may be reportable for other reasons.

Illness Cases: 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 employment. It includes acute and chronic illnesses or diseases which may be caused by inhalation, absorption, ingestion, or direct contact

Some conditions may be classified as either an injury or illness (but not both), depending upon the nature of the event that produced the condition. For example, a loss of hearing resulting from an explosion (an instantaneous event) is classified as an injury, the same condition arising from exposure to industrial noise over a period of time would be classified as an occupational illness. Similarly, irritation of the throat from exposure to chlorine funes would be classified as an injury if it resulted from a ruptured tank And an illness if the exposure occurred over a period of time. The Adverse reaction to a tetanus shot given for a laceration would be classified as an injury. Back cases should always be recorded as an injury. It should be noted that all occupational illnesses are reportable and recordable incidents regardless of the type of treatment provided.

Fatalities: Work related fatalities are reportable and recordable regardless of the time between the injury and the death or the length of the illness. Lost workdays attributable to the incident are not counted and any charged should be removed from the record.

Lost Workdays: Lost workdays are defined as the number of workdays (consecutive or not), beyond the day of injury or onset of illness, the employee was away from work or limited to restricted work activity. The number of days away from work or days of restricted work activity does not include the day of injury or onset of illness or any days on which the employee would not have worked even though able to work, e.g. vacation days, days off, or holidays are not counted. Termination of employment may stop the count of lost workdays if unrelated to the employee's injury or illness. If termination is related to injury/illness, an estimate of actual workdays lost shall be made. Retirements unrelated to injury or lilness stop the count of lost workdays. Otherwise days lost are estimated. Lost workday counts cease when injury or illness is determined as totally disabling. Lost workday count stops when position employee was in when injured is abolished due to work completion, e.g. a dozer operator lost workdays count would not continue beyond last day of dozer operations on the project even if the operator still could not perform the operator functions.

Restricted work: The number of workdays on which, because of injury or illness: (1) the employee was assigned to another job on a temporary basis, (2) 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. Lost workday count stops when employee is permanently transferred to another permanently established position.

Contractor-Controlled Worksite Associated with the Contract: The following and similar locations are considered contractor-controlled worksites:

All areas within the boundaries of the construction site including shops, plants, storage areas, haul-roads and borrow and fill areas.

All offsite locations (plants, shops, rock quarries, borrow areas, erection sites, etc.) used exclusively for supporting construction activities. All roads where traffic control is a contractor responsibility.