

SCENARIO 10.1

A 6-foot-tall construction worker was exposed to a fall distance of 20 feet to the ground on a jobsite. To protect the worker from falls, the employer required the use of a personal fall arrest system (PFAS). The PFAS equipment consists of the following:

- a body belt
- an 8-foot lanyard with deceleration pack
- a piece of rope tied to a beam overhead as the anchor point
 - The beam is approximately 8 feet above the working surface and 28 feet to the ground.
 - The lanyard is attached to the rope and the body belt with non-locking snaphooks.

SCENARIO 10.2

Employees are excavating a trench for a new waterline pipe. The trench is 10 feet deep, and the employees are required to enter the trench to perform the task. At the beginning of the job, a supervisor with no knowledge of the types of hazards that could be present in such an excavation project inspected the trench as work was progressing. During the inspection, water accumulated in the trench, and there was no protective system in place. To access the trench, the backhoe operator has individual workers stand in the bucket, and he lowers them into the trench and then lifts them out when finished.

SCENARIO 10.3

The following four incident reports were received by Construction Company XYZ over the previous calendar year:

Incident 1: On February 3, Mike George was driving a forklift truck on the construction jobsite when he his hand got caught between the side of the truck and a stack of materials. He went to the emergency room and received an x-ray. The x-ray was negative for any breaks. He was told to use an ice pack, take aspirin, and return to work.

Incident 2: Joe Wilson had been performing a repetitive job task for a few weeks. He developed inflammation in his shoulder and went to the local clinic on May 3. The physician assistant gave Joe a prescription anti-inflammatory shot and told him he could return to work.

Incident 3: John Smith injured his left hand at work on June 8. He went to the doctor and was diagnosed with a sprained wrist. The doctor told John to stay home for three days and return to work on June 12.

Incident 4: Mary Williams drove to work on October 10. While walking from her car to the corporate office, she slipped and fell injuring her back. The physician told her she had a bruised back. She had to stay home for two weeks and returned to work on October 24.

OSHA's Form 300 (Rev. 01/2004) Log of Work-Related Injuries and Illnesses

Note: You can type input into this form and save it. Because the forms in this recordkeeping package are "fillable/writable" PDF documents, you can type into the input form fields and then save your inputs using the free Adobe PDF Reader. In addition, the forms are programmed to auto-calculate as appropriate.

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.



Year 20

Form approved OMB no. 1218-0176

Establishment name

You must record information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR Part 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an Injury and Illness Incident Report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.

City State

Identify the person		Describe the case		Classify the case		Enter the number of days the injured or ill worker was:		Select the "injury" column or choose one type of illness:										
(A) Case no.	(B) Employee's name	(C) Job title (e.g., Welder)	(D) Date of injury or onset of illness (e.g., 2/10)	(E) Where the event occurred (e.g., Loading dock north end)	(F) Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g., Second degree burns on right forearm from acetylene torch)	(G) Death	(H) Days away from work	(I) Job transfer or restriction	(J) Other recordable cases	(K) Away from work restriction	(L) On job transfer or work restriction	(M) Injury	(1) Skin disorder	(2) Respiratory condition	(3) Poisoning	(4) Hearing loss	(5) All other illnesses	
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Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

Save Input Add a Form Page

SCENARIO 10.4

1. A construction worker could be exposed to falling debris that could strike him in the head.
2. An employee is engaged in a chipping task. Flying materials could strike him in the eye.
3. An employee is exposed to hazards to his feet. The hazards include stepping on sharp objects and impact hazards from falling objects.
4. An employee is exposed to noise levels that are in excess of the allowable levels under the OSHA standards.
5. A construction employee is exposed to harmful dusts. Engineering control measures were instituted, but the employee is being exposed to levels above OSHA's permissible exposure limit (PEL).