A very common OSHA recordkeeping mistake is to include all reported work-related injury and illness cases on the OSHA log, listing cases without any lost worktime as “other recordable cases.” Including all reported cases leads many companies to believe they have higher OSHA recordable incidence rates than is necessarily the case.

Recording a work-related injury or illness as an other recordable case requires more judgment and knowledge of the OSHA recordkeeping requirements and more monitoring of the health care treatment provided to the injured worker than does coding any other type of case. The OSHA log is a tool for recording and counting work-related injuries and illnesses that reach the level of severity that the affected worker misses time from work or is unable to perform his or her regular work duties or requires medical treatment. Not all work-related injuries reach this level of severity.

In its simplest definition, an other recordable case is a work-related injury or illness that does not involve death, one or more days away from work, or one or more days of restricted work or job transfer, and where the employee receives medical treatment beyond first aid.

The OSHA recordkeeping requirements exclude first aid from medical treatment. If a case does not involve death, days away from work or days of restricted work or job transfer, it is counted as an other recordable case only if medical treatment is provided. Similar cases where only first aid is provided are not recordable cases.

The definitions of medical treatment and first aid are vital to understanding which injuries and illnesses are other recordable cases and which are not recordable cases. This installment will focus on the definition of first aid; the previous installment focused on medical treatment.

What is first aid?
The OSHA recordkeeping requirements provide a list of 14 first-aid treatments at 1904.7(b)(5)(ii). This is a comprehensive list, which means only those treatments included on the list are considered first aid for OSHA recordkeeping purposes. These treatments are considered first aid regardless of the professional qualifications of the person providing the treatment.
The 14 first-aid treatments are:

1. using a nonprescription medication at nonprescription strength (for medications available in both prescription and nonprescription form, a recommendation by a physician or other licensed health care professional to use a nonprescription medication at prescription strength is considered medical treatment for recordkeeping purposes);

2. administering tetanus immunizations (other immunizations, such as hepatitis B vaccine or rabies vaccine, are considered medical treatment);

3. cleaning, flushing or soaking wounds on the surface of the skin;

4. using wound coverings, such as bandages, Band-Aids™ and gauze pads, or using butterfly bandages or Steri-Strips™ (other wound-closing devices, such as sutures, staples, etc., are considered medical treatment);

5. using hot or cold therapy;

6. using any nonrigid means of support, such as elastic bandages, wraps and nonrigid back belts (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);

8. drilling of 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 or chiropractic treatment are considered medical treatment for recordkeeping purposes); or

There are some defining characteristics that distinguish first-aid treatment from medical treatment. First aid:

- is usually administered on location immediately after the injury or illness occurs;

- generally consists of one-time or short-term treatment;

- involves treatments that are usually simple and require little or no technology;

- can be administered by people with little training and even by the injured or ill person;

- is usually administered to keep the condition from worsening, while the injured or ill person is awaiting medical treatment.

Cases in which only first-aid treatments are provided are not recordable on the OSHA log as other recordable cases. Also, do not include as other recordable cases any injuries or illnesses in which no treatment was provided.

Recordkeeping information resources
The complete Recordkeeping 101 and 201 series, plus the handy *Ten tips to improve your OSHA log*, are available online at [www.dli.mn.gov/OSHA/Recordkeeping.asp](http://www.dli.mn.gov/OSHA/Recordkeeping.asp).

Next Recordkeeping 201 installment:
Counting employees and hours

MNOSHA career opportunities
The Minnesota Occupational Safety and Health (MNOSHA) program, administered by the Minnesota Department of Labor and Industry, was established by the Minnesota Legislature in 1973.

Working for MNOSHA can be a very rewarding job. Minnesota’s economy has a great variety of industries and its business leaders are often at the forefront of new technology. Keeping up with new developments is challenging and exciting. And MNOSHA investigators are one of the very few individuals with the authority to affect improvements in working conditions for all Minnesotans.

If you wish to speak to someone about jobs with Minnesota OSHA, contact a MNOSHA supervisor at:

- (651) 284-5050; or
- toll-free at 1-877-470-6742.