Tips for Completing OSHA Form 300, Log of Work-Related Injuries and Illnesses

Use the Occupational Safety and Health Administration (OSHA) Form 300, Log of Work-Related Injuries and Illnesses, to catalog and document work-related injuries and illnesses at your organization. The log shows the extent and severity of each work-related case.

Organizations often have a designated OSHA recordkeeper who works with accident investigators, occupational health staff, and others to gather specific case details and required OSHA Form 300 information. Recordkeepers use the case information, along with 29 CFR 1904 recordkeeping regulations, to determine if you need to document the case on OSHA Form 300.

The tips included in this handout will help you complete the OSHA Form 300.

**CALENDAR YEAR**

Record the last two digits of the calendar year, not fiscal year, in the upper right corner of the OSHA Form 300.

**IDENTIFY THE PERSON (COLUMNS A, B, C)**

**Case number (Column A)**

Identify a case number for each mishap. Use the case number to tie the case to mishap investigation results, workers’ compensation claims, and medical records.

**Employee’s name (Column B)**

Include the employee’s name. Omit an employee’s name if their case is a privacy concern (29 CFR 1904.29). Instead, document “privacy case,” in lieu of the employee’s name. Keep a separate, confidential list of the case numbers and employee names so you can update the cases and provide this information upon request.

**Job title (Column C)**

Document the employee’s Office of Personnel Management (OPM) job series number and job title, as specified in 29 CFR 1960. Also, enter a “V” before the OPM series for uncompensated volunteers.\(^1\),\(^2\).

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\(^1\) According to 29 CFR 1960 regulations, federal agencies consider volunteers to be “employees.” 29 CFR 1904.31 requires you to record injuries and illnesses of “employees.”

\(^2\) 29 CFR 1960.73(c) also requires federal agencies with recordable injuries and illnesses to volunteers to separately track the total number of hours worked by volunteers.
**Describe the Case (Columns D, E, F)**

Be specific when you describe the case to ensure you can readily identify the mishap area and injury or illness sustained, and help you trend mishap data later.

**Date of Injury or Onset of Illness (Column D)**

Identify the date of the mishap or the date the employee reported symptoms of an illness.

**Where the Event Occurred (Column E)**

Document the location of the incident. Rather than stating “production floor,” you want to say “production floor – quality assurance area.” If the quality assurance area covers a large space, you may also want to specify a location within the quality assurance area, or even reference machines or other nearby objects and materials.

**Describe the Injury or Illness (Column F)**

State the injury and illness. Examples can include fracture, poisoning, strain, and cut.

**Describe Parts of Body Affected (Column F)**

Identify the body part(s) affected during the mishap. Examples can include left forearm, right eye, lower back, and forehead.

**Describe Object/Substance that Directly Injured or Made Person Ill (Column F)**

Document the object or substance that made the person injured or ill. Examples can include falling from a stepladder, exposure to lead fumes, lifting heavy boxes, and improper use of acetylene torch.

**Classify the Case (Columns G, H, I, J)**

Determine the most serious outcome of the case. Mark only one box to show this outcome. Revise this section if the outcome becomes more serious. Cross out, erase, or white out the original entry during your update. Never mark more than one box in this area.
**DAYS AWAY FROM WORK OR ON JOB TRANSFER OR RESTRICTION (COLUMN K, L)**

Enter the numbers of days away from work AND on job transfer or restrictions related to this case. Work with medical professionals and supervisors to track this information. If this section does not apply to the case, it is a good practice to mark a zero in these columns. Update these entries as the injury or illness progresses. Refer to 29 CFR 1904 to help count these days.

**INJURY OR ILLNESS (COLUMN M)**

Note whether the case is an injury or illness. Mark only one box for the case. Any case considered a physical injury is simply marked “injury,” while illnesses have more options (i.e., skin disorders, respiratory conditions, poisoning, and hearing loss). Mark any other illnesses (e.g., ergonomics issues and allergic reactions) under the “all other illnesses” column.

**TALLYING TOTALS**

Include totals for each column at the bottom of the OSHA Form 300, helping you transfer the information more easily to the OSHA Form 300A.

For additional information on the SMCX’s services, please visit the SMCX-hosted website at: [https://smscx.org/](https://smscx.org/).