MIOSHA Recordkeeping and Cost of Injuries

Student Materials
Level Two MTI Course
Consultation Education and Training Division
Michigan Occupational Safety and Health Administration
Michigan Department of Licensing and Regulatory Affairs
www.michigan.gov/miosha
517-284-7720

(Revised 09/18)
MIOSHA Recordkeeping

PART 11. RECORDING AND REPORTING OCCUPATIONAL INJURIES AND ILLNESSES

Presented By:
Consultation Education and Training (CET) Division
Michigan Occupational Safety and Health Administration
Michigan Department of Licensing and Regulatory Affairs
www.michigan.gov/miosha
517-284-7720

Objectives

Discriminate between recordable and non-recordable workplace injuries.

Discuss the purpose and criteria for completing the MIOSHA Form 300, Form 301, and Form 300 A.

Calculate incident and lost workday case rates based on the information contained within the Form 300.
Objectives

Identify the North American Industry Classification System (NAICS) workplace injury reference data to compare individual incident rates to industry average.

Calculate the impact of accident costs on an organization’s profitability potential.

Scope

These rules provide for recordkeeping and reporting by public and private employers covered under the act as necessary or appropriate:

• for developing information regarding the causes and prevention of occupational injuries and illnesses,
• for maintaining a program of collection, compilation, and analysis of occupational safety and health statistics
Who Must Keep MIOSHA Records?

All employers with more than ten employees at any given time during the previous calendar year.

• Exception – if your establishment is classified as a partially exempt industry under this rule in Appendix A.

Who Must Keep MIOSHA Records?

Any employer who has been informed in writing by MIOSHA, BLS, or OSHA that you must keep records.
All Employers

All employers must report to MIOSHA any workplace incident that results in an employee:

• Fatality
• Inpatient hospitalization
• Amputation
• Loss of an eye

Definitions

“Amputation” means the traumatic loss of a limb or other external body part.

(a) A part, such as a limb or appendage, that has been severed, cut off, or amputated, either completely or partially.
(b) Fingertip amputations with or without bone loss.
Definitions

“Amputation” – cont.

(c) Medical amputations resulting from irreparable damage.

(d) Amputations of body parts that have since been reattached. Amputations do not include avulsions, enucleations, deglovings, scalpings, severed ears, or broken or chipped teeth.

Definitions

“Employer” means an individual or organization, including the state or a political subdivision, which employs one or more person.

“Establishment” means a single physical location where business is conducted or where services or industrial operations are performed.
Definitions

“First-aid” and “Medical treatment” both will be discussed in detail later.

“Hospitalization” means the inpatient admission to a hospital for treatment, observation, or any other reason.

“Inpatient hospitalization” means the formal admission to the inpatient service of a hospital or clinic for care or treatment.

Definitions

"Other potentially infectious material" means other potentially infectious material as defined in Occupational Health Standard Part 554 “Bloodborne Infectious Diseases,” as referenced in R 408.22102a. These materials include the following:

(a) Human bodily fluids, tissues, and organs.

(b) Other materials infected with the HIV or hepatitis B (HBV) virus, such as laboratory cultures or tissues from experimental animals.
Definitions

"Occupational injury or illness" means an abnormal condition or disorder. Occupational injury is a result of a work accident or from an exposure involving a single incident in the work environment and includes, but is not limited to, a cut, fracture, sprain, or amputation.

Occupational illnesses include both acute and chronic illnesses, including, but not limited to, a skin disease, respiratory disorder, or poisoning. Injuries and illnesses are recordable only if they are new, work-related cases that meet one or more of the recording criteria of these rules.
Definitions

"Physician or other licensed health care professional" means a physician or other licensed health care professional who is an individual and whose legally permitted scope of practice, that is, license, registration, or certification, allows him or her to independently perform, or be delegated the responsibility to perform, the activities described by these rules.

Definitions

"Recordable injuries and illness" means an injury or illness that meets the general recording criteria, and therefore is recordable, if it results in any of the following:
(a) Death.
(b) Days away from work.
(c) Restricted work or transfer to another job.
(d) Medical treatment beyond first-aid.
(e) Loss of consciousness.
Recording Criteria

All covered employers must record each fatality, injury or illness that:

- Is work-related and
- Is a new case and
- Meets one or more of the general recording criteria contained in rules 1112 to 1119
Determination of Work-Relatedness

**Rule 1110.** An injury or illness to be work-related if an event or exposure in the work environment either caused or contributed to the resulting condition or significantly aggravated a preexisting injury or illness. Work-relatedness is presumed for injuries and illnesses resulting from events or exposures occurring in the work environment, unless an exception in R 408.22110a(5) specifically applies.

Work Environment

“The establishment and other locations where one or more employees are working or are present as a condition of their employment. The work environment includes not only physical locations, but also the equipment or materials used by the employee during the course of his or her work.”
What is an Establishment?

What is an establishment?

May one business location include two or more establishments?

May an establishment include more than one physical location?

Telecommuting

If an employee telecommutes from home, the employee's home is not a business establishment and a separate 300 log is not required. An employee who telecommutes must be linked to one of your establishments.
EXCEPTIONS of Work-Relatedness

- In the work environment as a member of the general public rather than as an employee.
- Signs or symptoms surface at work but event or exposure that occurs outside the work environment.
- Voluntary participation.
- Result of an employee eating, drinking, or preparing food or drink for personal consumption.

EXCEPTIONS of Work-Relatedness

- Personal tasks
- Personal grooming, self-medication
- Motor vehicle accident while commuting
- Common cold or flu
- Mental Illness
Parking Lots and Access Roads

ARE

Considered part of the employers premises.
Therefore injuries and illnesses occurring in the parking lots and access roads are considered work related and must be recorded on the establishment’s log if they meet the recording criteria.

Significant Aggravation

A pre-existing injury or illness is significantly aggravated when an event or exposure in the work environment results in any of the following (which would not have occurred but for the occupational event or exposure):

• Death
• Loss of consciousness
• Days away from work
• Days of restricted or job transfer
• Medical treatment
Travel Status

• Work activities “in the interest of the employer.”
• Home away from home.
• Detour for personal reasons are not work related.

Working At Home

Cases will be considered work-related if the injury or illness occurs:

• while the employee is performing work for pay or compensation,
• and the injury or illness is directly related to the performance of work rather than the home environment.
New Case

You must consider an injury or illness to be a “new case” if any of the following apply:

• The employee has not previously experienced a recordable injury or illness of the same type that affects the same part of body;
  
  or

• The employee previously experienced a recordable injury or illness of the same type that affects the same part of body but had recovered completely and an event or exposure in the work environment caused the signs and symptoms to reappear.

General Recording Criteria

An injury or illness is recordable if it results in one or more of the following:
• Death
• Days away from work
• Restricted work or transfer to another job
• Medical treatment beyond first aid
• Loss of consciousness
• Significant injury or illness diagnosed by a physician or other Licensed Health Care Professional (LHCP)
Days Away From Work

- Begin Counting Day After Injury
- Calculated on Calendar Days
- 180 Day Cap

Restricted Work Activity

- An employee is unable to perform all routine job tasks or cannot work for a complete day.
- A physician or LHCP recommends that the employee not perform one or more of the routine functions of the job.
- “Routine Functions” work activities the employee regularly performs at least once per week.
Transfer to Another Job

• An employee is assigned to a job other than his/her regular job for part of the day.

• Employee permanently assigned to a job that has been modified or permanently eliminates the routine functions. At least one day must be reported on the Log 300.

Medical Treatment

"Medical treatment" means the management and care of a patient to combat disease or disorder. For the purposes of these rules, medical treatment does not include any of the following:

• Observation or counseling
• Diagnostic purposes
• First-aid
First Aid Treatment

- Nonprescription medication at nonprescription strength
- Administering tetanus immunizations
- Cleaning, flushing, or soaking wounds
- Bandages, Band-Aids, gauze pads, butterfly bandages or steri-strips
- Using hot or cold therapy
- Nonrigid means of support
- Temporary immobilization devices

First Aid Treatment

- Drilling of a fingernail or toenail to relieve pressure, or drain fluid from a blister.
- Eye patches.
- Removing foreign bodies from eye using only irrigation or a cotton swab.
- Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs, or other simple means.
- Finger guards.
- Massages.
- Drinking fluids for relief of heat stress.
Loss of Consciousness

Must be recorded regardless of treatment or lack of treatment.

If not treated then record as “other recordable.”

Significant Diagnosed Injury/Illness

- Cancer
- Chronic irreversible disease
- Fractured or cracked bone
- Punctured ear drum

Note: Always recorded regardless of recording criteria if work related.
Needle Stick and Sharps Injuries

- Record all needle stick and sharps injuries involving contamination by another person’s blood or other potentially infectious material.

- Record splashes or other exposures to blood or other potentially infectious material if it results in a diagnosis of a bloodborne illness or meets the general recording criteria.

- Additional needle stick criteria found in Part 554.

Sharps Injury Log

Amendment to Bloodborne Infectious Diseases Standard Part 554:

- Establish and maintain a sharps injury log for recording of percutaneous injuries from contaminated sharps.

- Information must protect confidentiality.
Medical Removal

- If removed under the medical surveillance requirements of a MIOSHA standard, you must record the case on the MIOSHA Form 300.
- Recorded as either one involving days away from work or days of restricted work activity.
- Voluntary removal below the removal levels required by the standard need not be recorded.

Recording Criteria for Hearing Loss

If an employee’s hearing test reveals:

- employee has experienced a work-related standard threshold shift (STS) in hearing in one or both ears.
- and the employee's total hearing level is 25 decibels (dB) or more above audiometric zero (averaged at 2000, 3000, and 4000 Hz) in the same ear or ears as the STS.
- you must record the case on the MIOSHA 300 Log, column 5.
Standard Threshold Shift

A standard threshold shift, or STS, as a change in hearing threshold, relative to the baseline audiogram for that employee, of an average of ten decibels (dB) or more at 2000, 3000, and 4000 hertz (Hz) in one or both ears.


Recordable Standard Threshold Shift

First, must be an STS

Additional criterion to meet recordability:

25 dB shift from zero (averaged at 2000, 3000, and 4000 Hz) requires the STS to be recorded
### Example of Recordable NIHL

<table>
<thead>
<tr>
<th></th>
<th>2000 Hz</th>
<th>3000 Hz</th>
<th>4000 Hz</th>
<th>Averages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baseline</td>
<td>20</td>
<td>20</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td>Current</td>
<td>25</td>
<td>35</td>
<td>35</td>
<td></td>
</tr>
<tr>
<td><strong>Difference/ Baseline</strong></td>
<td><strong>5</strong></td>
<td><strong>15</strong></td>
<td><strong>15</strong></td>
<td><strong>35/3=12</strong></td>
</tr>
<tr>
<td>Difference from audiometric Zero</td>
<td>25</td>
<td>35</td>
<td>35</td>
<td><strong>95/3=32</strong></td>
</tr>
</tbody>
</table>

STS Average = 12 dB, is > 10 dB, therefore is an STS
32 dB diff from aud zero, is ≥ 25 dB, therefore is Recordable

### Example of Non-recordable NIHL Loss

<table>
<thead>
<tr>
<th></th>
<th>2000 Hz</th>
<th>3000 Hz</th>
<th>4000 Hz</th>
<th>Averages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baseline</td>
<td>20</td>
<td>20</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td>Current</td>
<td>25</td>
<td>30</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td><strong>Difference/ Baseline</strong></td>
<td><strong>5</strong></td>
<td><strong>10</strong></td>
<td><strong>10</strong></td>
<td><strong>25/3=8</strong></td>
</tr>
<tr>
<td>Difference/ From audiometric Zero</td>
<td>25</td>
<td>30</td>
<td>30</td>
<td><strong>85/3=28</strong></td>
</tr>
</tbody>
</table>

STS Average = 8 dB, which is < required 10 dB, therefore not an STS
Hearing loss is significant, but technically not STS, therefore not recordable
**Tuberculosis**

- Record a case where an employee is exposed to someone with a known case of active tuberculosis, and that employee subsequently develops a tuberculosis infection.
- Record the case on the 300 log as “respiratory condition.”

**MIOSHA Recordkeeping Forms**

- MIOSHA Form 300 “Log of Work-Related Injuries and Illnesses.”
- MIOSHA Form 300A “Summary of Work-Related Injuries and Illnesses.”
- MIOSHA Form 301 “Injury and Illness Incident Report.”
- Where to order forms:
  
  Management Information Systems Section
  517-284-7788
  www.michigan.gov/recordkeeping
Forms

- You must enter each recordable injury or illness on the MIOSHA 300 and 301 incident report within seven calendar days.
- An equivalent form which has the same information may be used as a replacement.
- Forms can be kept on a computer or at another location as long as they can be produced when they are requested.
Illness Classification

Skin Diseases or Disorders
- Exposure to chemicals, plants, or other substances.
- Examples: Contact dermatitis, eczema, or rash caused by primary irritants and sensitizers or poisonous plants; oil acne; friction blisters, chrome ulcers; inflammation of the skin.

Respiratory Conditions
- Associated with breathing hazardous biological agents, chemicals, dust, gases, vapors, or fumes.
- Examples: Silicosis, asbestosis, acute congestion, occupational asthma, reactive airways, toxic inhalation injury.
Illness Classification

Poisoning includes disorders evidenced by the abnormal concentration of toxic substances in bodily fluids or breath caused by absorption or ingestion

• Examples: Lead, mercury, cadmium, arsenic, or other metals; carbon monoxide, hydrogen sulfide, organic solvents; insecticide sprays; poisoning by other chemicals.

Illness Classification

All other illnesses

• Heatstroke, sunstroke, heat exhaustion, heat stress; freezing, frostbite, effects of ionizing and nonionizing radiation (welding flash, ultra-violet rays, lasers); bloodborne pathogens; tumors...
Musculoskeletal Disorders (MSDs)

Injuries and disorders of the muscles, nerves, tendons, ligaments, joints, cartilage and spinal discs.

May record as injury or all other illness.

Musculoskeletal Disorders

• Applies the same recording criteria to musculoskeletal disorders (MSDs) as to all other injuries and illnesses.

• Employer retains flexibility to determine whether an event or exposure in the work environment caused or contributed to MSD.
Privacy Concern Cases

- An injury or illness to an intimate body part or reproductive system.
- An injury or illness resulting from sexual assault.
- Mental illness.

Privacy Concern Cases

- HIV infection, hepatitis, tuberculosis
- Needlestick and sharps injuries
- If the employee independently and voluntarily requests that his or her name not be entered on the MIOSHA 300 log.
Privacy Concern Cases

- You may not enter the employee's name on the MIOSHA 300 Log.
- Instead enter "privacy case" in the space normally used for the employee's name.
- You must keep a separate confidential list of the case numbers and employee names for your privacy concern cases.

Privacy Protection

- If you believe that information describing the privacy concern case may be personally identifiable even though the employee’s name has been omitted.
- You may use discretion and put “privacy case” on the MIOSHA 300 and 301 forms.
- Keep a separate confidential list of the case numbers and employee names.
Privacy Protection

• Other privacy protections:
  ◦ If you give the forms to people not authorized by the rule, you must remove the names first.

• Exceptions for:
  ◦ Auditor/consultant.
  ◦ Workers’ compensation or other insurance.
  ◦ Public health authority or law enforcement agency.

Group Activity

As a small group fill out the 300 Log for each of the case study scenarios provided in the Recordkeeping Case Study Exercise.

You will need:
  300 Log
  Case Study Exercise
  Blank Calendar
  MIOSHA Recordkeeping General Guide for Recording
  Part 11 – Recording and Reporting of Occupational Injuries and Illnesses.
Multiple Business Establishments

• Keep a separate MIOSHA Form 300 for each establishment that is expected to be in operation for a year or longer.

• May keep one MIOSHA Form 300 for all short-term establishments.

• Each employee must be linked with an establishment.

Multiple Business Establishments

• If an injury or illness occurs to your employee at one of your establishments, record on the log of that establishment.

• If employee is injured or becomes ill and is not at one of your establishments you must record the case on the establishment he/she is linked with.
Temporary Employees

If you provide the day-to-day supervision for these employees, it is recorded on your log and you are responsible for the Reporting Requirements under this rule.

If the temporary or contractor’s employee is under the day-to-day supervision of the temporary service agency or contractor, the temporary service agency or contractor is responsible for recording the injury or illness.

See Injury and Illness Recordkeeping Requirements for Temporary Workers Fact Sheet

Volunteers may be covered

Questions to ask:

• Is there an employer-employee relationship?
• How is work controlled?
• Is there compensation?

Reviewed on a case-by-case basis
Annual Summary Posting

- Review MIOSHA Form 300 for completeness and accuracy.
- Correct deficiencies if necessary.
- Complete MIOSHA Form 300A.

Annual Summary

A company executive must certify the summary:
- An owner of the company.
- An officer of the corporation.
- The highest ranking company official working at the establishment.
- The immediate supervisor of the highest ranking company official.

Post between February 1 thru April 30 of the year following the year covered by the summary.
Retention and Updating

- Retain forms for five years following the year that the forms cover.
- Update the MIOSHA Form 300 during that period.
- Do not need to update the MIOSHA Form 300A or Form 301.

Change of Ownership

- Each employer is responsible for recording and reporting only for that period of the year during which he or she owned the establishment.
- Old owner **must** transfer records to new owner.
- New owner must retain records. *New owner does not have to update or correct the records of the prior owner.*
Employee Involvement

• Requires employers to establish a procedure for employees to report injuries and illnesses and how to make the report.

• Employees have the right to report a work-related injury or illness.

• Employers are prohibited from discharging or in any manner discriminating against employees for reporting work-related injuries or illnesses.

OSHA Website Information

www.osha.gov/recordkeeping/finalrule/index
Occupational Disease Reporting

• Occupational Disease Definition: Human illness from employment with one of the following:
  o Repeated or continuous exposure.
  o Acute exposure to hazardous substance.
  o Presentation symptoms of a disease known to be associated with specific exposure.

Occupational Disease Reporting
Form MTSD-51

Form 300, entries in column M(2-6) are required to be reported.

Who must report:
  Physician, Hospital, Clinic or Employer

When:
  Within ten days after discovery of the occupational disease or condition.
Expanded Reporting Requirements

The rule expands the list of severe work-related injuries and illnesses that all employers must report to MIOSHA as described below.

Fatalities within eight hours
And the following within 24 hours:
• In-patient hospitalizations of one or more employees
• Amputations
• Loss of an eye
Fatality Reporting

REPORT WITHIN 8 HOURS
800-858-0397

24 Hour Reporting

• Work-related in-patient hospitalizations of one or more employees
• Work-related amputations
• Work-related losses of an eye

1-844-464-6742
Or
Michigan.gov/recordkeeping
Electronic Submissions

The final rule revises OSHA's regulation on Recording and Reporting Occupational Injuries and Illnesses (29 CFR 1904), and by adopting MIOSHA Part 11.

The new rule requires certain employers to electronically submit injury and illness data to OSHA that they are already required to keep under OSHA regulations. The content of these establishment-specific submissions depends on the size and industry of the employer.

Compliance Schedule

2018

Establishments with 20-249 employees in industries identified in appendix B of the standard must submit information from their: 2017 form 300A by July 1, 2018

Establishments with 250 or more employees in industries not identified in appendix A of the standard must submit their: 2017 form 300A by July 1, 2018
Compliance Schedule

2019

Beginning in 2019 and every year thereafter, the information must be submitted by March 2.

Electronic Submission of Injury and Illness Records to OSHA

1. Information must be submitted once a year in accordance with the compliance schedule.
2. Data will be submitted electronically into a Federal database.
Electronic Submission of Injury and Illness Records to OSHA

3. Part time, seasonal and temporary employees should be included as employees for the company.

4. If a company is routinely required to submit data, OSHA will not notify you about your routine submittal.

5. If a company is not routinely required to keep injury and illness records MIOSHA or OSHA will notify you by mail if you will have to submit data as part of an individual data collection.

6. MIOSHA or OSHA will also announce data collections through the Federal Register, newsletters, on the web site and other means.
Bureau of Labor Statistics

- Employers are randomly selected each year, by mail.
- Information collected creates the nation’s occupational injury and illness statistics.
- Promptly complete and return it.

Finding your industry code (NAICS)

First find your NAICS code at [www.census.gov/eos/www/naics](http://www.census.gov/eos/www/naics)

Then review Appendix A of MIOSHA’s Part 11 Recording and Reporting of Occupational Injuries and Illnesses to determine if your company NAICS is identified as partially exempt.
What is an Incident Rate?

• An OSHA Incidence Rate (IR) represents the number of recordable injuries and illnesses that occur among a given number of full-time workers (usually based on 100) over a given period of time (typically one calendar year).

• For example, a calculated rate of 5.0 for a contractor represents a rate of injury and/or illness at five per 100 workers. It does not matter if the contractor employs 20 or 2,000 workers, the rate will always be based on 100 workers, allowing one to compare rates for various contractors of different size.

How An Incident Rate Is Calculated

\[
\text{Total Rec. Cases} \times 200,000 = \frac{\text{Total Rec. Cases} \times 200,000}{\text{Total Hours Worked}}
\]

The 200,000 figure in the formula represents the number of hours 100 employees working 40 hours per week, 50 weeks per year would work and provides the standard base for calculating incidence rates.
Employer Days Away Restricted Transfer Rate (DART) Calculation

Cases with Lost, Restricted, Transfer Days x 200,000
Total Hours Worked

Compare Your Company to Others

In Michigan:
http://www.michigan.gov/lara/0,4601,7-154-11407_30929-39936--,00.html

In the Nation:
https://www.bls.gov/iif/oshsum.htm
MOD Rates: Impact on Workers’ Comp Cost

A MOD rate contributes to how much companies pay each month in workers’ compensation premiums. It is partly determined by the industry classification in which a company operates and how many OSHA recordables it accumulates.

MOD Rates: Impact on Workers’ Comp Cost

If a company’s MOD rate is 1.0, they pay the industry’s average rate. However, if the MOD rate is .80, they pay 20 percent less than the industry rate, and conversely, if the MOD rate is 1.2, they pay 20 percent more than the industry rate. Ultimately, employers control their workers’ compensation costs by improving their safety and health program and reducing the number of recordable’s that occur in their facilities.
ACTIVITY

Safety Pays Program

Three Things That Are Extremely Important To Remember

1. Read and refer to Part 11. Recording and Reporting of Occupational Injuries and Illnesses standard.

2. Documentation is essential.

3. When in doubt, record.
Recordkeeping Questions?

✓ General Assistance
✓ Forms
✓ Posters
✓ Information

Michigan Occupational Safety and Health Administration (MIOSHA)
Technical Services Division (TSD)
Management Information Systems Section (MISS)
530 W. Allegan Street, P.O. Box 30643
Lansing, Michigan 48909-8143
www.michigan.gov/recordkeeping
517-284-7788

Assessment

The purpose of this assessment is to validate the knowledge learned in class.

Passing score of 70% correct is required.

Class reference materials/books are not allowed to be used during the assessment.

Collaboration/discussion with others is not allowed during the assessment.

Answers will be reviewed after everyone completes and submits their assessment.
### Online Transcript

访问网站：[www.macomb.edu/webadvisor](http://www.macomb.edu/webadvisor)

- 选择 NonCredit/Continuing Education
- 点击 Log In

**What?**
- 检查个人课程 –  proficient / not proficient
- 跟踪通过 MTI 完成的课程
- 提交成绩单以展示认证
- 管理账户信息

**How?**
- 选择 What’s My User ID?
- 输入姓氏和 SS# 或 Macomb ID
- 选择 Log In

如果您需要帮助，请拨打 586-498-4106 或发送电子邮件至 mti@macomb.edu

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### Thank You For Attending This Presentation

- [Michigan Department of Licensing and Regulatory Affairs](http://www.michigan.gov/lara)
- [Michigan Occupational Safety and Health Administration](http://www.michigan.gov/miosha)
- Consultation Education and Training Division
- P.O. Box 30643
- 525 West Allegan Street
- Lansing, MI 48909-8143
- Phone: 517-284-7720
- Fax: 517-284-7725
- [www.michigan.gov/miosha](http://www.michigan.gov/miosha)
MIOSHA Recordkeeping & Cost of Injuries
Student Resources

MIOSHA Standard:

Part 11. Recording and Reporting of Occupational Injuries & Illnesses (pdf)

MIOSHA Publications:

MIOSHA Recordkeeping Forms (xls)
MIOSHA Form 300 – Log of Work-Related Injuries & Illnesses (pdf)
MIOSHA Form 300A – Summary of Work-Related Injuries & Illnesses (pdf)
MIOSHA Form 301 – Injury and Illness Incident Report (pdf)
MIOSHA Recordkeeping General Guide for Recording (MISS-1) (doc)
Injury & Illness Recordkeeping Requirements for Temporary Workers Fact Sheet (CET-0193) (doc)

Websites:

MIOSHA Recordkeeping
OSHA Recordkeeping
Michigan Department of Licensing and Regulatory Affairs
Michigan Occupational Safety and Health Administration
Consultation Education and Training Division
525 W. Allegan St., P.O. Box 30643
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For further information or to request consultation, education and training services
call 517-284-7720
or
visit our website at www.michigan.gov/miosha

www.michigan.gov/lara

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