OSHA's Form 301

Injury and Illness Incident Report

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

This Injury and Illness Inident Report is one of the first forms you must fill out when a recordable work-related injury or illness has occurred. Together with the Log of Work-Related Injuries and Illnesses and the accompanying Summary, these forms help the employer and OSHA develop a picture of the extent and severity of work-related incidents. Within 7 calendar days after you receive information that a recordable work-related injury or illness has occurred, you must fill out this form or an equivalent. Some state worker's compensation, insurance, or other reports may be acceptable substitutes. To be considered an equivalent form, any substitute must contain all te information asked for on this form. According to Public Law 91-596 and 29 CFR 1904, OSHA's recordkeeping rule, you must keep this form on file for 5 years following the year to which it pertains. If you need additional copies

of this form, you may photocopy and use as many as you need.						
Completed by						
Title						
Phone Date						

Information about the employee		Case Number:	6		
Name	Henry T Nguyen	Incident Date	4/12/2008		
Address	715 Russell Blvd, Davis, CA 95601-	Time employee began work	9:00:00 AM		
		IncidentTime:	4:00 PM	Check if time cannot be determined	
Birthdate:	5/6/1962	What was the employee doing just before the incident occurred? Describe the activity, as well as the tools, equipment, or material the employee was using. Be specific. Examples: "climbing a ladder while carrying roofing materials"; "spraying chlorine from hand sprayer"; "daily computer key-entry."			
Hire Date:	1/1/2003	Using chemicals			
Information about thephysician or other health care professional		What happened? Tell us how the injury occurred. Examples: "When ladder slipped on wet floor, worker fel 20 ft."; "Worker was sprayed with chlorine when gasket broke during replacement"; "Worker developed soreness in wrist over time."			
Physician or	other health care professional	He was not wearing proper protection			
Treatment F	eacility				
		What was the injury or illness? Tell us the part of the body that was affected and how it was affected; be mo specifide than "hurt," "pain," or "sore." Examples: "strained back"; "chemical burns, hand"; "carpal tunnel syndrome."			
		Developed a rash	from chemical spilla	age	
Was emplo	yee treated in an emergency room?				
✓	,	What object or substance directly harmed the employee? Examples: "concrete floor"; "chlorine"; saw." If this question does not apply to the incident, leave it blank. Acid			
Was the em	ployee hospitalized overnight as an in-patient?	.5.5			

If the employee died, when did death occur? Date of death