



INCIDENT REPORTING LOG for CALENDAR YEAR: 20\_\_\_\_

| Date of Incident /Illness | Time of Incident | Employee's Name | Job Title | How & Where Incident Occurred | Details of Injury/Illness | Injury/Illness Outcome (See Below) | Type of Incident (See Below) | # Days Absent | # Days Job Transfer/ Restriction |
|---------------------------|------------------|-----------------|-----------|-------------------------------|---------------------------|------------------------------------|------------------------------|---------------|----------------------------------|
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Classify Injury/Illness

Choose the "number" that represents the most serious outcome.

- "1" - Death
- "2" - Days away from Work
- "3" - Job Transfer or Restriction
- "4" - Other Recordable Cases.

Type of Incident

Choose the "letter" that best categorizes the type of incident

- "A" - Injury
- "B" - Skin Disorder
- "C" - Respiratory Condition
- "D" - Poisoning
- "E" - Hearing Loss
- "F" - All Other Illnesses