



## INJURY & ILLNESS REPORTING INFORMATION

Per SPS 332.205, all Wisconsin public employers must complete and submit this summary form, or the equivalent OSHA 300A form, by March 1 of each year even if no work-related injuries or illnesses occurred during the year. If applicable, use a zero to indicate no cases. Follow the link to the electronic reporting link: <https://esla.wi.gov/PortalCommunityLogin>

It is important to be familiar with Safety and Professional Services (SPS) Chapter 332-Public Employee Safety and Health. This chapter outlines the occupational safety and health standards that Wisconsin public employers must follow. SPS 332 also provides for compliance with the federal OSHA standards as well as additional SPS codes. SPS 332 is available using the following link: [http://docs.legis.wisconsin.gov/code/admin\\_code/sps/safety\\_and\\_buildings\\_and\\_environment/326\\_360/332.pdf](http://docs.legis.wisconsin.gov/code/admin_code/sps/safety_and_buildings_and_environment/326_360/332.pdf)

Here are some important definitions and excerpts from Wis. Statute Chapter 101 Department of Safety and Professional Services-Regulation of Industry, Buildings, and Safety and SPS 332-Public Employee Safety and Health:

- 101.01(3)"Employee" means any person who may be required or directed by any employer, in consideration of direct or indirect gain or profit, to engage in any employment, or to go or work or be at any time in any place of employment.
- 101.055(2)(b) "Public employee" or "employee" means any employee of the state, of any agency or of any political subdivision of the state.
- 101.055(2)(d) "Public employer" or "employer" means the state, any agency or any political subdivision of the state.
- 101.055(7)(a) A public employer shall maintain records of work-related injuries and illnesses and shall make reports of these injuries and illnesses to the department at time intervals specified by rule of the department. These records shall be available to the department, the employer's employees and the employees' representatives. This paragraph does not authorize disclosure of patient health care records except as provided in ss. 146.82 and 146.83.
- SPS 332.205 Injury and illness report. Pursuant to s. 101.055 (7) (a), Stats., and beginning January 1, 2004, each employer shall report work-related injuries and illnesses to the department for the previous year by March 1 of each year. The report shall be made on form SBD-10710 or equivalent.

If we do not receive your SBD10710 submission by the March 1st deadline, orders may be issued. In addition to orders, we may conduct a SPS 332 safety inspection.

Feel free to visit our new website for more information!  
<https://dsps.wi.gov/Pages/Programs/PublicSafety/Default.aspx>

# An Overview: Recording Work-Related Injuries & Illness

## When is an injury or illness considered work-related?

An injury or illness is considered work-related if an event or exposure in the work environment caused or contributed to the condition or significantly aggravated a preexisting condition. Work-relatedness is presumed for injuries and illnesses resulting from events or exposures occurring in the workplace, unless an exception specifically applies. See 29 CFR Part 1904.5(b)(2) for the exceptions. The work environment includes the establishment and other locations where one or more employees are working or are present as a condition of their employment. See 29 CFR Part 1904.5(b)(1).

## Which work-related injuries and illnesses should you record?

Record those work-related injuries and illnesses that result in:

- Death
- Loss of consciousness
- Days away from work
- Restricted work activity or job transfer
- Medical treatment beyond first aid

You must also record work-related injuries and illnesses that are significant (as defined below) or meet any of the additional criteria listed below. You must record any significant work-related injury or illness that is diagnosed by a physician or other licensed health care professional. You must record any work-related case involving cancer, chronic irreversible disease, a fractured or cracked bone, or a punctured eardrum. See 29 CFR 1904.7.

## What are the additional criteria?

You must record the following conditions when they are work-related

- Any needlestick injury or cut from a sharp object that is contaminated with another person's blood or other potentially infectious material
- Any case requiring an employee to be medically removed under the requirements of an OSHA health standard
- Tuberculosis infection as evidenced by a positive skin test or diagnosis by a physician or other licensed health care professional after exposure to a known case of active tuberculosis.
- An employee's hearing test (audiogram) reveals 1) that the employee has experienced a Standard Threshold Shift (STS) in hearing in one or both ears (averaged at 2000, 3000, and 4000 Hz) and 2) the employee's total hearing level is 25 decibels (dB) or more above audiometric zero (also averaged at 2000, 3000, and 4000 Hz) in the same ear(s) as the STS.

## What is medical treatment?

Medical treatment includes managing and caring for a patient for the purpose of combating disease or disorder. The following are not considered medical treatments and are

NOT recordable:

- Visits to a doctor or health care professional solely for observation or counseling
- Diagnostic procedures, including administering prescription medications that are used solely for diagnostic purposes
- Any procedure that can be labeled first aid

## What is first aid?

If the incident required only the following types of treatment, consider it first aid. Do NOT record the case if it involves only:

- Using non-prescription medications at nonprescription strength
- Administering tetanus immunizations
- Cleaning, flushing, or soaking wounds on the skin surface
- Using wound coverings, such as bandages, BandAids™, gauze pads, etc., or using SteriStrips™ or butterfly bandages
- Using hot or cold therapy
- Using any totally non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc.

- Using temporary immobilization devices while transporting an accident victim (splints, slings, neck collars, or back boards)
- Drilling a fingernail or toenail to relieve pressure, or draining fluids from blisters
- Using eye patches
- Using simple irrigation or a cotton swab to remove foreign bodies not embedded in or adhered to the eye
- Using irrigation, tweezers, cotton swab or other simple means to remove splinters or foreign material from areas other than the eye
- Using finger guards
- Using massages
- Drinking fluids to relieve heat stress

#### **How do you decide if the case involved restricted work?**

Restricted work activity occurs when, as the result of a work-related injury or illness, an employer or health care professional keeps, or recommends keeping, an employee from doing the routine functions of his or her job **or** from working the full workday that the employee would have been scheduled to work before the injury or illness occurred.

#### **How do you count the number of days of restricted work activity or the number of days away from work?**

Count the number of calendar days the employee was on restricted work activity or was away from work as a result of the recordable injury or illness. Do not count the day on which the injury or illness occurred in this number. Begin counting days from the day after the incident occurs. If a single injury or illness involved both days away from work and days of restricted work activity, enter the total number of days for each. You may stop counting days of restricted work activity or days away from work once the total of either or the combination of both reaches 180 days.

#### **What if the outcome changes after you record the case?**

If the outcome or extent of an injury or illness changes after you have recorded the case, simply draw a line through the original entry or, if you wish, delete or white-out the original entry. Then write the new entry where it belongs. Remember, you need to record the most serious outcome for each case.

#### **Classifying injuries-**

An injury is any wound or damage to the body resulting from an event in the work environment.

Examples:

- Cut, puncture, laceration, or abrasion
- Fracture
- Bruise or contusion
- Chipped tooth
- Amputation
- Insect bite
- Electrocution, or a thermal, chemical, electrical, or radiation burn
- Sprain and strain injuries to muscles, joints, and connective tissues are classified as injuries when they result from a slip, trip, fall or other similar accidents.

#### **Classifying illnesses-**

##### **Skin diseases or disorders-**

Skin diseases or disorders are illnesses involving the worker's skin that are caused by work 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-**

Respiratory conditions are illnesses associated with breathing hazardous biological agents, chemicals, dust, gases, vapors, or fumes at work.

Examples:

- Silicosis, asbestosis, pneumonitis, pharyngitis, rhinitis or acute congestion
- Farmer's lung, beryllium disease, tuberculosis, occupational asthma, reactive airways dysfunction syndrome (RADS), chronic obstructive pulmonary disease (COPD), hypersensitivity pneumonitis, toxic inhalation injury, such as metal fume fever, chronic obstructive bronchitis, and other pneumoconiosis.

**Poisoning-**

Poisoning includes disorders evidenced by abnormal concentrations of toxic substances in blood, other tissues, other bodily fluids, or the breath that are caused by the ingestion or absorption of toxic substances into the body.

Examples:

- Poisoning by lead, mercury, cadmium, arsenic, or other metals
- Poisoning by carbon monoxide, hydrogen sulfide, or other gases; poisoning by benzene, benzoyl, carbon tetrachloride, or other organic solvents
- Poisoning by insecticide sprays, such as parathion or lead arsenate
- Poisoning by other chemicals, such as formaldehyde.

**Hearing Loss-**

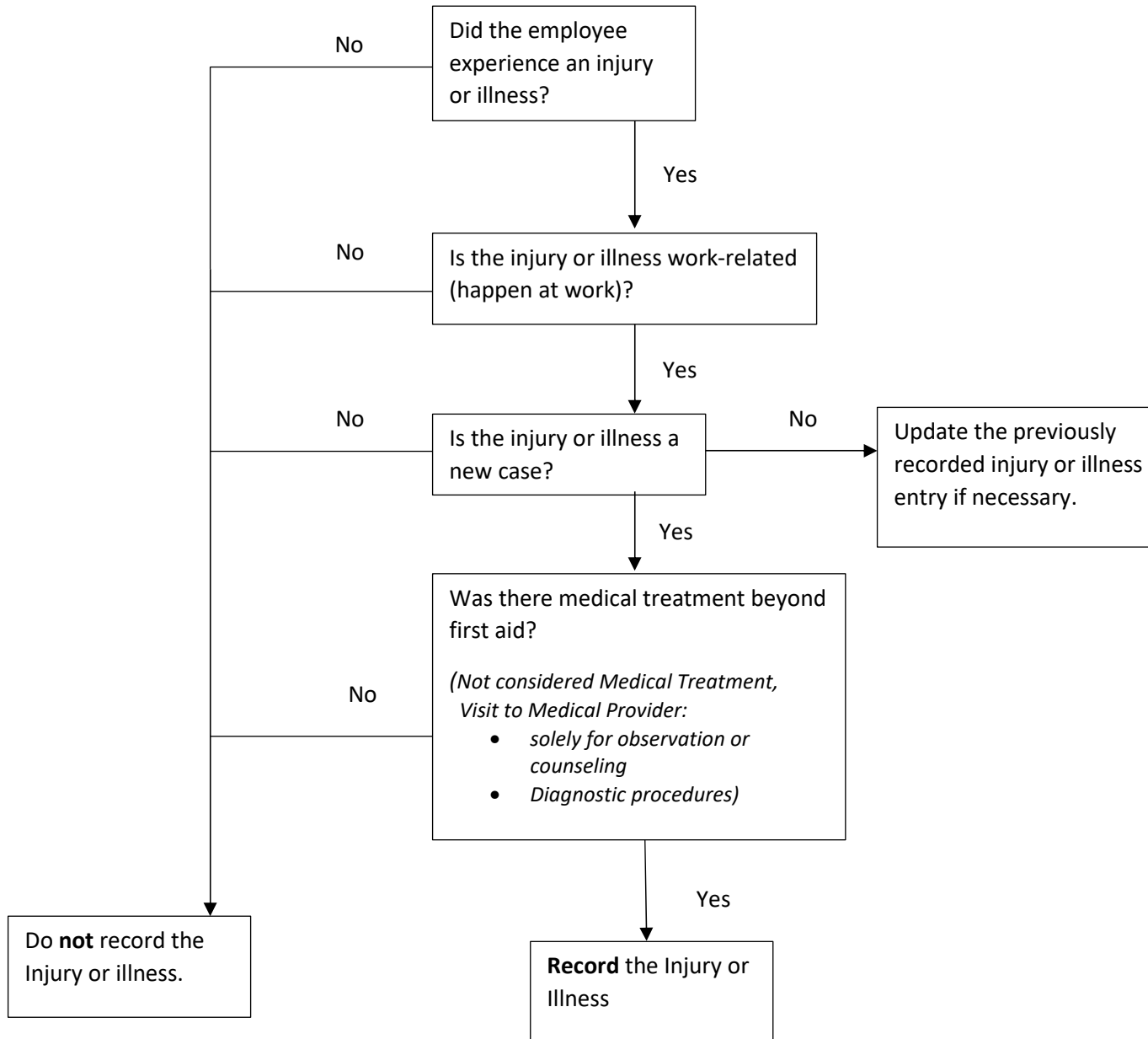
Noise-induced hearing loss is defined for recordkeeping purposes as a change in hearing threshold relative to the baseline audiogram of an average of 10 dB or more in either ear at 2000, 3000 and 4000 hertz total hearing level is 25 decibels (dB) or more above audiometric zero (also averaged at 2000, 3000, and 4000 hertz) in the same ear(s).

**All other illnesses-** All other occupational illnesses.

Examples:

- Heatstroke, sunstroke, heat exhaustion, heat stress and other effects of environmental heat
- Freezing, frostbite, and other effects of exposure to low temperatures
- Decompression sickness
- Effects of ionizing radiation (isotopes, x-rays, radium)
- Effects of nonionizing radiation (welding flash, ultra-violet rays, lasers) • Anthrax; bloodborne pathogenic diseases, such as AIDS, HIV, hepatitis B or hepatitis C
  - Brucellosis, or Histoplasmosis, or Coccidioidomycosis
- Malignant or benign tumors

# Should the Injury or Illness be recorded on the log?



## **Injury & Illness Recording Q&A**

### **Are poll workers, elected officials considered employees in my municipality for Injury & illness reporting purposes?**

Yes, injury and illness reporting would have to occur for elected officials, clerks and paid poll workers. Voluntary poll workers would not be included.

### **Would contracted workers be considered employees for Injury & Illness Reporting?**

No, independent contractors are not considered employees for the purposes of Injury & Illness Reporting.

### **Do I count the day on which the injury occurred, or the illness began?**

No, you begin counting days on the day after the injury occurred or the illness began.

### **How do I count weekends, holidays or other days the employee would not have worked anyway?**

You must count the number of calendar days the employee unable to work as a result of the injury or illness regardless of whether or not the employee was scheduled to work on those day(s). Weekends days, holidays, vacation days or other days off are included in the total number of days recorded if the employee would not have been able to work on those days because of a work-related injury or illness.

### **If the case occurs in one year, but results in days away during the next calendar year, do I record the case in both years?**

You must enter the days away from work on the Injury & Illness Log Form 10710A for the year the injury occurred. If the employee is still away when you prepare the annual summary, estimate total number of calendar days you expect the employee to be away from work, use this number to calculate the total for the annual summary. Update the initial log enter later when the day count is known or reaches the 180-day cap.

### **A test for a bloodborne disease from a work-related exposure comes back negative, is this marked as an injury/illness?**

The conduct of diagnostic procedures, such as x-rays and blood tests, including the administration of prescription medication used solely for the diagnostic purposes (e.g. eyedrops to dilate pupils) is not considered medical treatment, so the case is not recordable. If the test result for bloodborne disease was positive, the case would be recorded as an illness.

### **If an employee has missed work-days due to injury and then has returns to work on restricted duty, do you record both the lost days and the restricted days on the Work-Related Injury & Illness log?**

Since days away are the most severe you would check column H and enter the number of days away in column K. When the employee returns on restricted duty you would enter the number of days in column L.

### **Is chiropractic care considered medical treatment beyond first aid?**

Yes, chiropractic treatment is considered medical treatment for recordkeeping purposes.

### **How long must the employer the *Log* and *Summary* on file?**

The *Log* and *Summary* must be kept for 5 years following the year to which they pertain.

### **When must the employer post the *Summary*?**

The *Summary* (not the *Log*) by February 1 of the year following the year covered by the form and keep it posted until April 30 of that year.

# How to Fill Out the Log of Work-Related Injuries & Illnesses (10710A)

DSPS Form 10710A						Year <b>2020</b>											
Log of Work-Related Injuries and Illnesses						Dept of Safety & Professional Services											
<p>According to SPS 332.205, you must record information about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an injury and illness incident report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local DSPS Inspector for help.</p>						Establishment name <i>Town of ABC</i>											
						City <i>Anywhere</i>	State <i>Wisconsin</i>										
Identify the person		Describe the case			Classify the case												
(A) Case No.	(B) Employee's Name	(C) Job Title (e.g., Welder)	(D) Date of injury or illness (mo./day)	(E) Where the event occurred (e.g., Loading dock north end)	(F) Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g. Second degree burn on right fore arm from acetylene torch)	Enter the number of days the injured or ill worker was:		Check the "injury" column or choose one type of illness:									
						CHECK ONLY ONE box for each case based on the most serious outcome for that case:											
						Death	Days away from work	Remained at work		Away From Work (days)	On job transfer or restriction (days)	Injury	Skin Disorder	Respiratory Condition	Poisoning	Hearing Loss	All other illnesses
						(G)	(H)	Job transfer or restriction	Other recordable cases	(K)	(L)	(1)	(2)	(3)	(4)	(5)	(6)
1	Mark Johnson	Street Crew	01/01	Dump truck in town parking lot	sprained ankle, fell while exiting truck		X			2	4	X					
2	Wendy Adams	Welder	02/01	Sign Shop	back strain from lifting box			X	<del>X</del>		5	X					
3	Raph Borg	Farmer	03/14	Regal Park	paronychia from cutting brush				X				X				

Be as specific as possible. You can use two lines if you need

Revise the log if the injury or illness progresses and the outcome is more serious than you originally recorded for the case. Cross out, erase, or white-out the original entry if hard copy.



Choose **ONLY ONE** of these categories. Classify the case by recoding the most serious outcome of the case. Column G (Death) being the most serious and column J (Other recordable cases) being the least serious.

Note whether the case involves an injury or illness.

The **Log of Work-Related Injuries & Illnesses** is used to classify work-related injuries and illnesses and to note the extent and severity of each case. When an incident occurs, use the Log to record specific details about what happened and how it happened. If you need additional pages, photocopy the printout or insert additional pages in the spreadsheet.

## Information Needed to Complete the Annual Summary of Work-Related Injuries and Illnesses Report

<b>For the Reporting Calendar Year:</b>	<b>Location on Log of Work-Related Injuries &amp; Illnesses</b>
Average Number of Employees	Total number of employees paid in reporting year divided by the number of pay periods in reporting year
Total hours worked by those employees for the year	Total hours worked by all employees during the reporting year
Total number of <b>cases</b> with Days Away from Work	Total Column H
Total number of <b>cases</b> with Job Transfer or Restrictions	Total Column I
Total number of Other Recordable <b>cases</b>	Total Column J
Total number of <b>days</b> way from work	Total Column K
Total number of <b>days</b> of job transfer or restriction	Total Column L
Injuries	Total Column 1
Skin Disorders	Total Column 2
Respiratory Conditions	Total Column 3
Poisonings	Total Column 4
Hearing Losses	Total Column 5
All Other Illnesses	Total Column 6



## Worksheet to Help You Complete the Summary

### Average Number of Employees for the Calander Year

If you pay the same number of employees every pay period throughout the year, you can use that number.

If you have seasonal or the number fluctuates, you can use this formula to calculate the average number of employees.

Number of employees paid each pay period during the year **(A)**  
(Include full time, part-time, seasonal, salaried, hourly)

Enter number of pay periods for the year. **(B)**  
(Include pay periods with no employees)

Example: biweekly pay periods = 26, Weekly pay periods = 52

Divide the number of employees by the number of pay periods

Round to the highest whole number to get the Average Number of Employees **(C)**

<b>A</b> _____
<b>B</b> _____
$\frac{\mathbf{A}}{\mathbf{B}}$ = _____
<b>C</b> _____

If you have questions, please contact your DSPS Occupational Safety Inspector for your area.

Please see the DSPS Inspector map. <https://dsps.wi.gov/Documents/Programs/Maps/PublicSafety.pdf>

## Worksheet to Help You Complete the Summary

### Total Hours All Employees Worked for the Calander Year

Include hours worked by salaried, hourly, part-time, seasonal, board members, election workers and other worker subject to day-to-day supervision by your establishment.

Do NOT include: vacation, sick leave, holidays, even if your employees were paid for it.

Estimate the hours the employees actually worked **if**  
-your employment keeps records only of hours paid, **or**  
-you have employees not paid by the hour.

### Optional Worksheet

Number of full-time employees in your establishment for the Calander year \_\_\_\_\_

Multiply by number of work hours for a full-time employee in a year      **X** \_\_\_\_\_

This is the number of Full-time hours worked \_\_\_\_\_

Add the number of overtime hours and hours worked by seasonal part-time, and temporary employees.      **+** \_\_\_\_\_

Round the answer to the next highest whole number      \_\_\_\_\_ Total Hours Worked

**If you have questions, please contact your DSPS Occupational Safety Inspector for your area.**

**Please see the DSPS Inspector map. <https://dsps.wi.gov/Documents/Programs/Maps/PublicSafety.pdf>**