

Is It OSHA-Recordable? — The 6 Criteria

Recordkeeping accuracy is what drives every workplace-safety metric, EMR, and DART rate. Use these 6 criteria from 29 CFR 1904 to decide whether an injury or illness goes on the OSHA 300 Log — in the order OSHA expects you to consider them.

01**Is it work-related?**

An injury or illness is work-related if an event or exposure in the work environment caused or contributed to it, or significantly aggravated a pre-existing condition. The geographic-presumption rule + nine specific exceptions apply.

§1904.5(a)–(b)

02**Is it a new case?**

A case is "new" if the employee has not previously experienced a recorded injury/illness of the same type to the same body part, OR if they had fully recovered and a new work event caused the signs/symptoms to reappear.

§1904.6(a)

03**Death — always record**

Every work-related fatality is recordable. Report the fatality to OSHA within 8 hours by phone (1-800-321-OSHA) or the online portal. Inpatient hospitalizations, amputations, and eye loss must be reported within 24 hours.

§1904.7(b)(2), §1904.39

04**Days away, restricted, or transferred**

Record if the case results in one or more days away from work (DAW), restricted work (RWA), or job transfer. Count calendar days starting the day after the injury. Cap each case at 180 days combined DAW + RWA.

§1904.7(b)(3), (b)(4)

05**Medical treatment beyond first aid**

Record if treatment exceeds OSHA's first-aid list (1904.7(b)(5)(ii)). Prescription medications, sutures (any), wound closures (Steri-Strips OK as first aid), physical therapy, and rigid splints are medical treatment. Tetanus shots alone are NOT.

§1904.7(b)(5)(i)–(ii)

06**Loss of consciousness + special criteria**

Always record: any loss of consciousness, significant injury diagnosed by a PLHCP, needlesticks contaminated with blood/OPIM, standard threshold shifts at 25 dB HL or worse, MSK cases, and TB conversion.

§1904.7(b)(5)(ii) · §1904.8–.10