Chapter 296-27 WAC
RECORDKEEPING AND REPORTING

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Log and summary of occupational injuries and illnesses. [Statutory Authority: RCW 49.17.040, 49.17.150, and 49.17.240. WSR 79-08-115 (Order 79-9), § 296-27-030, filed 7/31/79. Statutory Authority: Chapters 42.30 and 43.22 RCW. RCW 49.17.040, 49.17.050 and 49.17.240. WSR 78-07-052 (Order 78-10), § 296-27-030, filed 6/28/78; Order 74-22, § 296-27-030, filed 5/6/74.] Repealed by WSR 02-01-064, filed 12/14/01, effective 1/1/02. Statutory Authority: RCW 49.17.010, [49.17].040, and [49.17].050.

Period covered by logs. [Statutory Authority: RCW 49.17.040, 49.17.150, and 49.17.240. WSR 79-08-115 (Order 79-9), § 296-27-040, filed 7/31/79; Order 74-22, § 296-27-040, filed 5/6/74.] Repealed by WSR 02-01-064, filed 12/14/01, effective 1/1/02. Statutory Authority: RCW 49.17.010, [49.17].040, and [49.17].050.

Summary and posting of the 2001 data. [Statutory Authority: RCW 49.17.010, [49.17].040, and [49.17].050. WSR 02-01-064, § 296-27-04103, filed 12/14/01, effective 1/1/02.] Repealed by WSR 15-11-066, filed 5/19/15, effective 7/1/15. Statutory Authority: RCW 49.17.010, 49.17.040, and 49.17.050.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER


296-27-010 Purpose and scope. [Statutory Authority: Chapters 42.30 and 43.22 RCW. RCW 49.17.040, 49.17.050 and 49.17.240. WSR 78-07-052 (Order 78-10), § 296-27-010, filed 6/28/78; Order 74-22, § 296-27-010, filed 5/6/74.] Repealed by WSR 02-01-064, filed 12/14/01, effective 1/1/02. Statutory Authority: RCW 49.17.010, [49.17].040, and [49.17].050.

296-27-01117 Recording criteria for work-related musculoskeletal disorders. [Statutory Authority: RCW 49.17.010, 49.17.040, 49.17.050, and 49.17.060. WSR 02-02-029, § 296-27-01117, filed 10/28/02, effective 1/1/03. Statutory Authority: RCW 49.17.010, [49.17].040, and [49.17].050. WSR 02-01-064, § 296-27-01117, filed 12/14/01, effective 1/1/02.] Repealed by WSR 03-04-085, filed 12/2/03, effective 1/1/04. Statutory Authority: RCW 49.17.010, 49.17.040, 49.17.050, and 49.17.060.


(11/22/16)

296-27-078 Effective date of regulations. [Statutory Authority: Chapters 42.30 and 43.22 RCW 94.17-040, 49.17-050 and 49.17-240. WSR 78-07-052 (Order 78-10), § 296-27-150, filed 6/28/78; Order 74-22, § 296-27-150, filed 5/6/74.] Repealed by WSR 00-11-098, filed 5/17/00, effective 8/1/00. Statutory Authority: RCW 49.17-010, [49.17].040, and [49.17].050.

Follow-up inspections. [Statutory Authority: RCW 49.17.040 and 49.17.050. WSR 86-03-064 (Order 86-02), § 296-27-16009, filed 1/17/86; WSR 81-14-006 (Order 81-13), § 296-27-16009, filed 6/22/81.] Repealed by WSR 87-03-011 (Order 86-48), filed 1/12/87. Statutory Authority: RCW 49.17.040 and 49.17.050.

Refusal or limitation of inspection. [Statutory Authority: RCW 49.17.040 and 49.17.050. WSR 87-03-011 (Order 86-48), § 296-27-16011, filed 1/12/87; WSR 83-24-013 (Order 83-34), § 296-27-16011, filed 11/30/83; WSR 81-14-006 (Order 81-13), § 296-27-16011, filed 6/22/81.] Repealed by WSR 00-11-098, filed 5/17/00, effective 8/1/00. Statutory Authority: RCW 49.17.010, [49.17].040, and [49.17].050.


Programmed inspections. [Statutory Authority: RCW 49.17.040 and 49.17.050. WSR 87-03-011 (Order 86-48), § 296-27-16026, filed 1/12/87.] Repealed by WSR 00-11-098, filed 5/17/00, effective 8/1/00. Statutory Authority: RCW 49.17.010, [49.17].040, and [49.17].050.

Unprogrammed inspections, follow-up inspections, monitoring inspections, and "high hazard" inspections. [Statutory Authority: RCW 49.17.040 and 49.17.050. WSR 87-03-011 (Order 86-48), § 296-27-16022, filed 1/12/87.] Repealed by WSR 00-11-098, filed 5/17/00, effective 8/1/00. Statutory Authority: RCW 49.17.010, [49.17].040, and [49.17].050.


Programmed inspections. [Statutory Authority: RCW 49.17.040 and 49.17.050. WSR 87-03-011 (Order 86-48), § 296-27-16026, filed 1/12/87.] Repealed by WSR 00-11-098, filed 5/17/00, effective 8/1/00. Statutory Authority: RCW 49.17.010, [49.17].040, and [49.17].050.


WAC 296-27-00101 Purpose and scope. (1) Purpose. Chapter 296-27 WAC requires employers to record work-related injuries and illnesses, and report to the division of occupational safety and health (DOSH) any work-related fatality, inpatient hospitalization, amputation, or loss of an eye within the time parameters specified in the rule.

(2) Scope. All employers covered by the Washington Industrial Safety and Health Act (WISHA) must comply with the requirements in this standard, unless otherwise specified.

Note: The recordkeeping and reporting requirements in this chapter are separate and distinct from the Industrial Insurance Act, Title 51 RCW, for workers' compensation benefits. These requirements do not mean that the employer or employee was at fault, or that a safety or health rule has been violated.

[Ch. 296-27 WAC p. 3]
WAC 296-27-00103 Partial exemption for employers with ten or fewer employees. (1) If your company had ten or fewer employees at all times during the last calendar year, you do not need to keep injury and illness records unless DOSH, OSHA, or the Bureau of Labor Statistics (BLS) informs you in writing that you must keep records under this section. However, as required by WAC 296-27-031, all employers covered by WISHA must report any work-related incident that results in a fatality, inpatient hospitalization, amputation, or the loss of an eye.

(a) The partial exemption for size is based on the number of employees in the entire company.

(b) To determine if you are exempt because of size, you need to determine your company's peak employment during the last calendar year. If you had no more than ten employees at any time in the last calendar year, your company qualifies for the partial exemption for size.

(2) If your company had more than ten employees at any time during the last calendar year, you must keep injury and illness records unless your establishment is classified as a partially exempt industry under WAC 296-27-00105.

WAC 296-27-00105 Partial exemption for establishments in certain industries. (1) If your establishment is classified in a specific, low hazard industry group listed in Table 1, Industry Exemption List for Recordkeeping at the end of this section, you do not need to keep injury and illness records unless DOSH, OSHA, or the BLS asks you to keep the records under this chapter. However, all employers must report to DOSH any work-related incident that results in a fatality, inpatient hospitalization, amputation, or the loss of an eye of any employee (see WAC 296-27-031).

(2) The partial industry classification exemption is based on the North American Industrial Classification System (NAICS), and it applies to individual business establishments. If a company has several business establishments engaged in different classes of business activities, some of the company's establishments may be required to keep records while others may be exempt.

Note: To determine your NAICS code, you can do one of the following:
1. Contact your nearest OSHA office or the department.
2. Use the search feature at the U.S. Census Bureau NAICS main web page: http://www.census.gov/eos/www/naics/. In the search box for the most recent NAICS, enter a keyword that describes your type of business. A list of primary business activities containing that keyword and the corresponding NAICS codes will appear. Choose the one that most closely corresponds to your primary business activity or refine your search to obtain other choices.

3. Rather than searching through a list of primary business activities, you may also view the most recent complete NAICS structure with codes and titles by clicking on the link for the most recent NAICS on the U.S. Census Bureau NAICS main web page: http://www.census.gov/eos/www/naics/. Then click on the two-digit sector code to see all the NAICS codes under that sector. Then choose the six-digit code of your interest to see the corresponding definition, as well as cross-references and index items, when available.

4. If you know your old SIC code, you can also find the appropriate 2002 NAICS code by using the detailed conversion (conciliation) between the 1987 SIC and 2002 NAICS available in Excel format for download at the "Concordances" link at the U.S. Census Bureau NAICS main web page: http://www.census.gov/eos/www/naics/.

<table>
<thead>
<tr>
<th>NAICS Code</th>
<th>Industry</th>
</tr>
</thead>
<tbody>
<tr>
<td>4412</td>
<td>Other Motor Vehicle Dealers</td>
</tr>
<tr>
<td>4431</td>
<td>Electronics and Appliance Stores</td>
</tr>
<tr>
<td>4461</td>
<td>Health and Appliance Stores</td>
</tr>
<tr>
<td>4471</td>
<td>Gasoline Stations</td>
</tr>
<tr>
<td>4481</td>
<td>Clothing Stores</td>
</tr>
<tr>
<td>4482</td>
<td>Shoe Stores</td>
</tr>
<tr>
<td>4483</td>
<td>Jewelry, Luggage, and Leather Goods Stores</td>
</tr>
<tr>
<td>4511</td>
<td>Sporting Goods, Hobby, and Musical Instrument Stores</td>
</tr>
<tr>
<td>4512</td>
<td>Book, Periodical, and Music Stores</td>
</tr>
<tr>
<td>4531</td>
<td>Florists</td>
</tr>
<tr>
<td>4532</td>
<td>Office Supplies, Stationery, and Gift Stores</td>
</tr>
<tr>
<td>4812</td>
<td>Nonscheduled Air Transportation</td>
</tr>
<tr>
<td>4861</td>
<td>Pipeline Transportation of Crude Oil</td>
</tr>
<tr>
<td>4862</td>
<td>Pipeline Transportation of Natural Gas</td>
</tr>
<tr>
<td>4869</td>
<td>Other Pipeline Transportation</td>
</tr>
<tr>
<td>4879</td>
<td>Scenic and Sightseeing Transportation</td>
</tr>
<tr>
<td>4885</td>
<td>Freight Transportation Arrangement</td>
</tr>
<tr>
<td>5111</td>
<td>Newspaper, Periodical, Book, and Directory Publishers</td>
</tr>
<tr>
<td>5112</td>
<td>Software Publishers</td>
</tr>
<tr>
<td>5121</td>
<td>Motion Picture and Video Industries</td>
</tr>
<tr>
<td>5122</td>
<td>Sound Recording Industries</td>
</tr>
<tr>
<td>5151</td>
<td>Radio and Television Broadcasting</td>
</tr>
<tr>
<td>5172</td>
<td>Wireless Telecommunications Carriers (except Satellite)</td>
</tr>
<tr>
<td>5173</td>
<td>Telecommunications Resellers</td>
</tr>
<tr>
<td>5179</td>
<td>Other Telecommunications</td>
</tr>
<tr>
<td>5181</td>
<td>Internet Service Providers and Web Search Portals</td>
</tr>
<tr>
<td>5182</td>
<td>Data Processing, Hosting, and Related Services</td>
</tr>
</tbody>
</table>

[Statutory Authority: RCW 49.17.010, 49.17.040, and 49.17.050. WSR 15-11-066, § 296-27-00101, filed 5/19/15, effective 7/1/15; WSR 02-01-064, § 296-27-00103, filed 12/14/01, effective 1/1/02.]

[Table 1 Industry Exemption List for Recordkeeping]

[Ch. 296-27 WAC p. 4] (11/22/16)
## WAC 296-27-00107 Keeping records for more than one agency

If you create records to comply with another government agency's injury and illness recordkeeping requirements, OSHA will consider those records as meeting federal recordkeeping requirements if OSHA accepts the other agency's records under a memorandum of understanding with that agency, or if the other agency's records contain the same information as required by 29 C.F.R., Part 1904. You may contact DOSH for help in determining whether your records meet OSHA's requirements.

[Statutory Authority: RCW 49.17.010, 49.17.040, and 49.17.050. WSR 15-11-066, § 296-27-00107, filed 5/19/15, effective 7/1/15. Statutory Authority: RCW 49.17.010, 49.17.040, 49.17.050, 49.17.060. WSR 09-01-158, § 296-27-00107, filed 12/23/08, effective 3/1/09; WSR 08-05-012, § 296-27-00107, filed 2/8/08, effective 4/1/08. Statutory Authority: RCW 49.17.010, 49.17.040, and 49.17.050. WSR 02-01-064, § 296-27-00107, filed 12/14/01, effective 1/1/02.]

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### Recordkeeping and Reporting

<table>
<thead>
<tr>
<th>NAICS Code</th>
<th>Industry</th>
</tr>
</thead>
<tbody>
<tr>
<td>296-27-011</td>
<td>Offices of Physicians</td>
</tr>
<tr>
<td>296-27-012</td>
<td>Offices of Dentists</td>
</tr>
<tr>
<td>296-27-013</td>
<td>Offices of Other Health Practitioners</td>
</tr>
<tr>
<td>296-27-014</td>
<td>Outpatient Care Centers</td>
</tr>
<tr>
<td>296-27-015</td>
<td>Medical and Diagnostic Laboratories</td>
</tr>
<tr>
<td>296-27-016</td>
<td>Child Day Care Services</td>
</tr>
<tr>
<td>296-27-017</td>
<td>Agents and Managers for Artists, Athletes, Entertainers, and Other Public Figures</td>
</tr>
<tr>
<td>296-27-018</td>
<td>Independent Artists, Writers, and Performers</td>
</tr>
<tr>
<td>296-27-019</td>
<td>Rooming and Boarding Houses</td>
</tr>
<tr>
<td>296-27-020</td>
<td>Full-Service Restaurants</td>
</tr>
<tr>
<td>296-27-021</td>
<td>Limited-Service Eating Places</td>
</tr>
<tr>
<td>296-27-022</td>
<td>Drinking Places (Alcoholic Beverages)</td>
</tr>
<tr>
<td>296-27-023</td>
<td>Electronic and Precision Equipment Repair and Maintenance</td>
</tr>
<tr>
<td>296-27-024</td>
<td>Personal and Household Goods Repair and Maintenance</td>
</tr>
<tr>
<td>296-27-025</td>
<td>Personal Care Services</td>
</tr>
<tr>
<td>296-27-026</td>
<td>Death Care Services</td>
</tr>
<tr>
<td>296-27-027</td>
<td>Religious Organizations</td>
</tr>
<tr>
<td>296-27-028</td>
<td>Grantmaking and Giving Services</td>
</tr>
<tr>
<td>296-27-029</td>
<td>Social Advocacy Organizations</td>
</tr>
<tr>
<td>296-27-030</td>
<td>Civic and Social Organizations</td>
</tr>
<tr>
<td>296-27-031</td>
<td>Business, Professional, Labor, Political, and Similar Organizations</td>
</tr>
</tbody>
</table>

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### Recordkeeping forms and recording criteria

This section describes the types of work-related injuries and illnesses that you must enter on the OSHA recordkeeping forms. This section also explains the OSHA
forms that you must use to record work-related fatalities, injuries, and illnesses.

[Statutory Authority: RCW 49.17.010, 49.17.040, and 49.17.050. WSR 15-11-066, § 296-27-0111, filed 5/19/15, effective 7/1/15; WSR 02-01-064, § 296-27-0111, filed 12/14/01, effective 1/1/02.]

**WAC 296-27-01101 Recording criteria.** (1) Employers required to keep records by this chapter must record each fatality, injury and illness that:

(a) Is work-related, see WAC 296-27-01103;
(b) Is a new case, see WAC 296-27-01105; and
(c) Meets one or more of the general recording criteria of WAC 296-27-01107.

(2) Additional criteria for specific cases such as needlestick and sharps injury cases, hearing loss cases, medical removal cases, and musculoskeletal disorder cases are located in WAC 296-27-01109 through 296-27-01115.

Note: The decision tree for recording work-related injuries and illnesses below shows the steps involved in determining whether a particular injury or illness is reportable.

### Decision Tree

1. Did the employee experience an injury or illness?
   - NO
   - YES
     1. Is the injury or illness work related?
        - NO
        - YES
          1. Is the injury or illness a new case?
             - NO
             - YES
               1. Update the previously recorded injury or illness entry if necessary.

2. Does the injury or illness meet the general recording criteria of the application to specific cases?
   - NO
   - YES

Note: The decision tree for recording work-related injuries and illnesses below shows the steps involved in determining whether a particular injury or illness is reportable.

**WAC 296-27-01103 Determination of work-relatedness.** (1) You must consider 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 subsection (2)(a) through (i) of this section specifically applies.

(2) An injury or illness occurring in the work environment is not recordable or considered work-related if it meets one of the following exceptions:

(a) At the time of the injury or illness, the employee was present in the work environment as a member of the public rather than as an employee.
(b) The injury or illness involves signs or symptoms that surface at work but result solely from a nonwork-related event or exposure that occurs outside the work environment.
(c) The injury or illness results solely from voluntary participation in a wellness program or in a medical, fitness, or recreational activity such as blood donation, physical examination, flu shot, exercise class, racquetball, or baseball.
(d) The injury or illness is solely the result of an employee eating, drinking, or preparing food or drink for personal consumption (whether bought on the employer's premises or brought in). For example, if the employee is injured by choking on a sandwich while in the employer's establishment, the case would not be considered work-related.
(e) The injury or illness is solely the result of an employee doing personal tasks (unrelated to their employment) at the establishment outside of the employee's assigned working hours.
(f) The injury or illness is solely the result of personal grooming, self-medication for a nonwork-related condition, or is intentionally self-inflicted.
(g) The injury or illness is caused by a motor vehicle accident and occurs on a company parking lot or company access road while the employee is commuting to or from work.
(h) The illness is the common cold or flu.
(i) The illness is a mental illness. Mental illness will not be considered work-related unless the employee voluntarily provides the employer with an opinion from a physician or other licensed health care professional with appropriate training and experience (psychiatrist, psychologist, psychiatric nurse practitioner, etc.) stating that the employee has a mental illness that is work-related.

Notes:
1. If the employee is made ill by ingesting food contaminated by workplace contaminants (such as lead), or gets food poisoning from food supplied by the employer, the case would be considered work-related.
2. Contagious diseases such as tuberculosis, brucellosis, hepatitis A, or plague are considered work-related if the employee is infected at work.

(3) If it is not obvious whether an event or exposure was work-related, you must evaluate the employee's work duties and work environment to determine if the event or exposure was work-related and resulted in either a new injury or illness or it significantly aggravated a preexisting condition. A preexisting condition is an injury or illness that is significantly aggravated by the event or exposure occurring in the work environment if it results in any of the following:

(a) Death, provided that the preexisting injury or illness would likely not have resulted in death but for the occupational event or exposure.
(b) Loss of consciousness, provided that the preexisting injury or illness would likely not have resulted in loss of consciousness but for the occupational event or exposure.
(c) One or more days away from work, or days of restricted work, or days of job transfer that otherwise would not have occurred but for the occupational event or exposure.
(d) Medical treatment in a case where no medical treatment was needed for the injury or illness before the work-
place event or exposure, or a change in medical treatment was necessitated by the workplace event or exposure.

(4) Injuries and illnesses that occur while an employee is on travel status are work-related if, at the time of the injury or illness, the employee was engaged in work activities "in the interest of the employer." Examples include travel to and from customer contacts, conducting job tasks, and entertaining or being entertained to transact, discuss, or promote business (work-related entertainment includes only entertainment activities being engaged in at the direction of the employer). Injuries or illnesses that occur when the employee is on travel status do not have to be recorded if they meet one of the exceptions listed in Table 2 of this subsection:

**Table 2**

<table>
<thead>
<tr>
<th>If the employee has:</th>
<th>You may use the following to determine if an injury or illness is work-related.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Checked into a hotel or motel for one or more days</td>
<td>When traveling employee checks into a hotel, motel, or other temporary residence, they establish a &quot;home away from home.&quot; You must evaluate the employee's activities after they check into the hotel, motel, or other temporary residence for their work-relatedness in the same manner as you evaluate the activities of a nontraveling employee. When the employee checks into the temporary residence, they are considered to have left the work environment. When the employee begins work each day, they reenter the work environment. If the employee has established a &quot;home away from home&quot; and is reporting to a fixed worksite each day, you also do not consider injuries or illnesses work-related if they occur while the employee is commuting between the temporary residence and the job location.</td>
</tr>
<tr>
<td>Taken a detour for personal reasons</td>
<td>Injuries or illnesses are not considered work-related if they occur while the employee is on a personal detour from a reasonably direct route of travel (e.g., has taken a side trip for personal reasons).</td>
</tr>
</tbody>
</table>

(5) Injuries and illnesses that occur while an employee is working at home are considered work-related if the injury or illness occurs while the employee is performing work for pay or compensation in the home, and the injury or illness is directly related to the performance of work and not to the home environment.

**WAC 296-27-01105** Determination of new cases. (1) You must consider an injury or illness to be a "new case" if:

(a) The employee has not previously experienced a recorded injury or illness of the same type that affects the same part of the body; or
(b) The employee previously experienced a recorded injury or illness of the same type that affected the same part of the body but had recovered completely (all signs and symptoms had disappeared) from the previous injury or illness, and an event or exposure in the work environment caused the signs or symptoms to reappear.

(2) For occupational illnesses where the signs or symptoms may recur or continue in the absence of an exposure in the workplace, the case must only be recorded once. Examples may include occupational cancer, asbestosis, byssinosis and silicosis.

(3) When an employee experiences the signs or symptoms of an injury or illness as a result of an event or exposure in the workplace, such as an episode of occupational asthma, you must treat the episode (even if the episode is a recurrence) as a new case.

(4) You are not required to seek the advice of a physician or other licensed health care professional. However, if you do seek such advice, you must follow the physician's or other licensed health care professional's recommendation about whether the case is a new case or a recurrence. If you receive recommendations from two or more physicians or other licensed health care professionals, you must make a decision as to which recommendation is the most authoritative (best documented, best reasoned, or most authoritative), and record the case based upon that recommendation.

**WAC 296-27-01107** General recording criteria. (1) You must consider an injury or illness to meet the general recording criteria, and therefore to be 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 for any length of time.

(2) You must also record any case that involves a significant injury or illness (see WAC 296-27-01107(21)) diagnosed by a physician or other licensed health care professional, even if it does not result in death, days away from work, restricted work, job transfer, medical treatment beyond first aid, or loss of consciousness.

(3) You must record an injury or illness that results in death by entering a check mark on the OSHA 300 Log in the space for cases resulting in death.

(4) When an injury or illness involves one or more days away from work, you must record the injury or illness on the OSHA 300 Log with a check mark in the space for cases involving days away and an entry for the number of calendar days away from work in the number of days column. If the employee is out for an extended period, you must enter an estimate for the number of days that the employee will be away from work.

(11/22/16)
away, and update the day count when the actual number of days is known.

(5) You begin counting days away on the day after the injury occurred or the illness began.

(6) To record an injury or illness for which the employee comes to work against the physician's or other licensed health care professional's recommendation, you must do the following:

(a) Record these injuries and illnesses on the OSHA 300 Log using the check box for cases with days away from work and enter the number of calendar days away recommended by the physician or other licensed health care professional.

(b) Record the days away whether the injured or ill employee follows the physician or licensed health care professional's recommendation or not.

Notes: 1. If you receive recommendations from two or more physicians or other licensed health care professionals, you may make a decision as to which recommendation is the most authoritative and record the case based upon that recommendation.

2. Encourage your employee to follow the recommendation.

(7) When an employee decides to stay at home after the date a physician or other licensed health care professional recommends that the employee return to work, you must end the count of days away from work on the date the physician or other licensed health care professional recommends that the employee return to work.

(8) You must count the number of calendar days the employee was 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). Weekend 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.

(9) When a worker is injured or becomes ill on a Friday and reports to work on a Monday, and was not scheduled to work on the weekend, you only need to record this case if you receive information from a physician or other licensed health care professional indicating that the employee should not have worked, or should have performed only restricted work, during the weekend. If so, you must record the injury or illness as a case with days away from work or restricted work and enter the day counts as appropriate.

(10) If a worker is injured or becomes ill on the day before scheduled time off such as a holiday, a planned vacation, or a temporary plant closing, you only need to record the case if you receive information from a physician or other licensed health care professional indicating that the employee should not have worked, or should have performed only restricted work, during the schedule time off. If so, you must record the injury or illness as a case with days away from work or restricted work and enter the day counts as appropriate.

(11) You are not required to keep track of the number of calendar days away from work if the injury or illness resulted in more than one hundred eighty calendar days away from work or days of job transfer or restriction. In such a case, entering one hundred eighty in the total days away column will be considered adequate.

(12) If the employee leaves your company for some reason unrelated to the injury or illness, such as retirement, a plant closing, or to take another job, you may stop counting days away from work, days of restriction, or days of job transfer. If the employee leaves your company because of the injury or illness, you must estimate the total number of days away, days of restriction, or days of job transfer and enter the day count on the OSHA 300 Log.

(13) If a case occurs in one calendar year but results in days away during the next calendar year, you only record the injury or illness once. You must enter the number of calendar days away for the injury or illness on the OSHA 300 Log for the year in which the injury or illness occurred. If the employee is still away from work because of the injury or illness when you prepare the annual summary, estimate the total number of calendar days you expect the employee to be away from work. Then use this number to calculate the total for the annual summary. Update the initial log entry later when the day count is known or reaches the one hundred eighty day cap.

(14) You must meet the following requirements for recording restricted work or job transfer.

(a) When an injury or illness involves restricted work or job transfer but does not involve death or days away from work, you must record the injury or illness on the OSHA 300 Log by placing a check mark in the space for job transfer or restriction and enter the number of restricted or transferred days in the restricted workdays column.

(b) Restricted work occurs when, as the result of a work-related injury or illness:

(i) You keep the employee from performing one or more of the routine functions of their job, or from working the full workday that they would otherwise have been scheduled to work; or

(ii) A physician or other licensed health care professional recommends that the employee not perform one or more of the routine functions of their job, or not work the full workday that they would otherwise have been scheduled to work.

(c) You do not have to record restricted work or job transfers if you, the physician, or other licensed health care professional impose the restriction or transfer only for the day on which the injury occurred or the illness began.

(d) A recommended work restriction is recordable only if it affects one or more of the employee's routine job functions. To determine whether this is the case, you must evaluate the restriction in light of the routine functions of the injured or ill employee's job. If the restriction from you, the physician, or other licensed health care professional keeps the employee from performing one or more of their routine job functions, or from working the full workday the injured or ill employee would otherwise have worked, the employee's work has been restricted and you must record the case.

(e) If an employee works only for a partial work shift because of the work-related injury or illness, you must record the partial day of work as a day of job transfer or restriction. However, you need not record the partial day of work if it is the same day the injury occurred or the illness began.

Note: The case is considered restricted work only if the worker does not perform all of the routine functions (as defined in this chapter) of their job or does not work the full shift that they would otherwise have worked.

(15) If you are not clear about the physician or other licensed health care professional's recommendation (i.e.,
engage only in "light duty" or "take it easy for the week"), you may ask the physician or other licensed health care professional:

(a) "Can the employee do all of their routine job functions?"
(b) "Can the employee work all of their normally assigned work shift?"

(i) If the answer to both of these questions is "Yes," then the case does not involve a work restriction and does not have to be recorded.
(ii) If the answer to one or both of these questions is "No," the case involves restricted work and must be recorded as a restricted work case.
(iii) If you are unable to obtain this additional information from the physician or other licensed health care professional who recommended the restriction, record the injury or illness as a case involving restricted work.

(16) To record an injury or illness for which a physician or other licensed health care professional recommends a job restriction, but the employee does all of their routine job functions, you must do the following:

(a) Record the injury or illness on the OSHA 300 Log as a restricted work case.

(b) Record this job restriction even if the employee chooses to do all of their routine job functions.

Notes: 1. If you receive recommendations from two or more physicians or other licensed health care professionals, you may make a decision as to which recommendation is the most authoritative and record the case based upon that recommendation.
2. If a physician or other licensed health care professional recommends a job restriction, you should ensure that the employee complies with that restriction.

(17) If you assign an injured or ill employee to a job other than their regular job for part of the day, you must record the case as a job transfer.

Notes: 1. This does not include the day on which the injury or illness occurred.
2. Transfers to another job are recorded in the same way as restricted work cases on the OSHA 300 Log. Example: If you assign, or a physician or other licensed health care professional recommends that you assign, an injured or ill worker to their routine job duties for part of the day and to another job for the rest of the day, the injury or illness involves a job transfer. You must record an injury or illness that involves a job transfer by placing a check in the box for job transfer.

(18) You count days of job transfer or restriction in the same way you count days away from work. The only difference is that, if you permanently assign the injured or ill employee to a job that has been modified or permanently changed in a manner that eliminates the routine functions the employee was restricted from performing, you may stop the day count when the modification or change is made permanent. You must count at least one day of restricted work or job transfer for such cases.

(19) If a work-related injury or illness results in medical treatment beyond first aid, you must record the case on the OSHA 300 Log. If the injury or illness did not involve death, one or more days away from work, one or more days of restricted work, or one or more days of job transfer, you enter a check mark in the box for cases where the employee received medical treatment but remained at work and was not transferred or restricted.

Note: The professional status of the person providing treatment has no effect on what is considered first aid or medical treatment as defined in WAC 296-27-051.

(20) You must record a case even if the injured or ill employee does not follow the physician or other licensed health care professional's recommendation for medical treatment.

(21) You must record "significant" diagnosed injuries or illnesses, such as work-related cases involving cancer, chronic irreversible disease, a fractured or cracked bone, or a punctured eardrum at the time of diagnosis by a physician or other licensed health care professional even if it does not result in death, days away from work, restricted work or job transfer, medical treatment beyond first aid, or loss of consciousness.

Note: OSHA believes that most significant injuries and illnesses will result in one of the criteria listed in WAC 296-27-01107(1): Death, days away from work, restricted work or job transfer, medical treatment beyond first aid, or loss of consciousness. However, there are some significant injuries, such as a punctured eardrum or a fractured toe or rib, for which neither medical treatment nor work restrictions may be recommended. In addition, there are some significant progressive diseases, such as byssinosis, silicosis, and some types of cancer, for which medical treatment or work restrictions may not be recommended at the time of diagnosis but are likely to be recommended as the disease progresses. Cancer, chronic irreversible diseases, fractured or cracked bones, and punctured eardrums are generally considered significant injuries and illnesses, and must be recorded at the initial diagnosis, even if medical treatment or work restrictions are not recommended, or are postponed, in a particular case.

WAC 296-27-01109 Recording criteria for needlestick and sharps injuries. (1) You must record all work-related needlestick injuries and cuts from sharp objects that are contaminated with another person's blood or other potentially infectious material (as defined in this chapter and by chapter 296-823 WAC, Occupational exposure to bloodborne pathogens). You must enter the case on the OSHA 300 Log as an injury. To protect the employee's privacy, you may not enter the employee's name on the OSHA 300 Log (see the requirements for privacy concern cases in WAC 296-27-01119 (3) and (4)).

(2) You must record cuts, lacerations, punctures, and scratches only if they are work-related and involve contamination with another person's blood or other potentially infectious material. If the cut, laceration, or scratch involves a clean object, or a contaminant other than blood or other potentially infectious material, you need to record the case only if it meets one or more of the general recording criteria in WAC 296-27-01107.

(3) If after recording the initial injury, the employee is later diagnosed with an infectious bloodborne disease, you must update both of the following on the OSHA 300 Log if it resulted in death, days away from work, restricted work, or job transfer:

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(a) The classification of the case from an injury to an illness; and

(b) The description to identify the infectious disease.

(4) You must record incidents where an employee is splashed or exposed to blood or other potentially infectious material without being cut or scratched on the OSHA 300 Log as an illness if:

(a) It results in the diagnosis of a bloodborne illness, such as HIV, hepatitis B, or hepatitis C; or

(b) It meets one or more of the general recording criteria in WAC 296-27-01107.

[Statutory Authority: RCW 49.17.010, 49.17.040, and 49.17.050. WSR 15-11-066, § 296-27-01109, filed 5/19/15, effective 7/1/15. Statutory Authority: RCW 49.17.010, 49.17.040, 49.17.050, and 49.17.060. WSR 03-09-110, § 296-27-01109, filed 4/22/03, effective 8/1/03. Statutory Authority: RCW 49.17.010, [49.17].040, and [49.17].050. WSR 02-01-064, § 296-27-01109, filed 12/14/01, effective 1/1/02.]

WAC 296-27-01111 Recording criteria for medical removal cases. (1) Under the medical surveillance requirements, you must record any case that involves the medical removal of an employee on the OSHA 300 Log.

(2) You must enter each medical removal case as either a case involving days away from work or a case involving restricted work activity. For medical removal cases that resulted from chemical exposure, you must check the "poisoning" column.

Notes: 1. Standards that do not include medical removal provisions include bloodborne pathogens and noise.

2. Standards that cover specific chemical substances have medical removal provisions. These standards include, but are not limited to, lead, cadmium, methylene chloride, formaldehyde, and benzene.

3. If you voluntarily remove an employee from exposure before the medical removal criteria are met, you do not have to record the case.

[Statutory Authority: RCW 49.17.010, 49.17.040, and 49.17.050. WSR 15-11-066, § 296-27-01111, filed 5/19/15, effective 7/1/15. Statutory Authority: RCW 49.17.010, 49.17.040, 49.17.050, 49.17.060. WSR 07-03-163, § 296-27-01113, filed 1/24/07, effective 1/1/07; WSR 03-24-085, § 296-27-01113, filed 12/2/03, effective 1/1/04; WSR 02-22-029, § 296-27-01113, filed 10/28/02, effective 1/1/03. Statutory Authority: RCW 49.17.010, [49.17].040, and [49.17].050. WSR 02-01-064, § 296-27-01113, filed 12/14/01, effective 1/1/02.]

WAC 296-27-01113 Recording criteria for occupational hearing loss cases. (1) You must record a hearing loss case on the OSHA 300 Log by checking the column for hearing loss if an employee's hearing test (audiogram) reveals that a recordable threshold shift (RTS) in one or both ears has occurred.

(2) To determine whether a RTS has occurred, you must evaluate the employee's current audiogram with their baseline audiogram. If the employee has previously experienced a recorded hearing loss, you must compare the employee's current audiogram with the audiogram reflecting the employee's previously recorded hearing loss case.

Note: Audiometric test results reflect the employee's overall hearing ability in comparison to audiometric zero. Therefore, using the employee's current audiogram, you must use the average hearing level at 2000, 3000, and 4000 Hz to determine whether or not the employee's total hearing level is 25 dB or more.

(3) To determine whether RTS has occurred, you may age adjust the employee's current audiogram results by using Tables A-1 or A-2 in Appendix A of this chapter. You may not use an age adjustment when determining whether the employee's total hearing level is 25 dB or more above audiometric zero.

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recordable injury or illness. Summarize this information on the OSHA 300-A form at the end of the year.

(b) Complete an OSHA 301 Incident Report form, or an equivalent form, for each recordable injury or illness entered on the OSHA 300 Log.

(c) Enter each recordable injury or illness on the OSHA 300 Log and 301 Incident Report within seven calendar days of receiving information that a recordable injury or illness has occurred.

Note: You may keep your injury and illness forms on a computer if you can produce equivalent forms when they are needed, as described under WAC 296-27-02111, 296-27-03101(1), and 296-27-03103.

(3) For privacy concern cases, you must follow these requirements when filling out the OSHA 300 Log:

(a) You may not enter the employee's name on the OSHA 300 Log. Instead, enter "privacy case" in the space normally used for the employee's name in order to protect the identity of the injured or ill employee when another employee, a former employee, or an authorized employee representative is provided access to the OSHA 300 Log under WAC 296-27-02111.

(b) You must keep a separate, confidential list of the case numbers and employee names for your privacy concern cases so you can update the cases and provide the information to the government if asked to do so.

(c) The following injuries or illnesses are the only types of privacy concern cases recognized by this section:

(i) An injury or illness to an intimate body part or the reproductive system;
(ii) An injury or illness resulting from a sexual assault;
(iii) Mental illnesses;
(iv) HIV infection, hepatitis, or tuberculosis;
(v) Needlestick injuries and cuts from sharp objects that are contaminated with another person's blood or other potentially infectious material (see definition in WAC 296-27-051 of this chapter); and

(vi) Other illnesses if the employee independently and voluntarily requests that their name not be entered on the log.

(4) If you have a reasonable basis to 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 in describing the injury or illness on both the OSHA 300 and 301 forms.

Instructions issued under this chapter, may result in the issuance of citations and assessment of penalties as provided for in chapter 296-900 WAC, Administrative rules.

(c) To a public health authority or law enforcement agency for uses and disclosures for which consent, an authorization, or opportunity to agree or object is not required under Department of Health and Human Services Standards for Privacy of Individually Identifiable Health Information, 45 C.F.R. 164.512.

(6) Falsification, failure to keep records or reports.

(a) RCW 49.17.190(2) of the act provides that "whoever knowingly makes any false statement, representation, or certification in any application, record, report, plan, or other document filed or required to be maintained pursuant to this chapter shall, upon conviction be guilty of a gross misdemeanor and be punished by a fine of not more than ten thousand dollars, or by imprisonment for not more than six months or by both."

(b) Failure to maintain records or file reports required by this chapter, or in the detail required by the forms and instructions issued under this chapter, may result in the issuance of citations and assessment of penalties as provided for in chapter 296-900 WAC, Administrative rules.

WAC 296-27-0201 Other injury and illness recordkeeping requirements.

[Statutory Authority: RCW 49.17.010, [49.17].040, and [49.17].050. WSR 15-11-066, § 296-27-0111, filed 5/19/15, effective 7/1/15. Statutory Authority: RCW 49.17.010, 49.17.040, 49.17.050. WSR 07-03-163, § 296-27-0111, filed 1/24/07, effective 4/1/07; WSR 03-24-085, § 296-27-0111, filed 12/2/03, effective 1/1/04; WSR 02-22-029, § 296-27-0111, filed 10/28/02, effective 1/1/03. Statutory Authority: RCW 49.17.010, [49.17].040, and [49.17].050. WSR 02-01-064, § 296-27-0111, filed 12/14/01, effective 1/1/02.]
for recordkeeping purposes. You must record the injury and illness on the OSHA 300 Log of the injured or ill employee's establishment, or on an OSHA 300 Log that covers that employee's short-term establishment.

(5) If an employee of one of your establishments is injured or becomes ill while visiting or working at another of your establishments, or while working away from any of your establishments, you must record the injury or illness on the OSHA 300 Log of the establishment at which the injury or illness occurred. If the employee is injured or becomes ill and is not at one of your establishments, you must record the case on the OSHA 300 Log at the establishment at which the employee normally works.

[Statutory Authority: RCW 49.17.010, 49.17.040, and 49.17.050. WSR 15-11-066, § 296-27-02101, filed 5/19/15, effective 7/1/15; WSR 02-01-064, §296-27-02101, filed 12/14/01, effective 1/1/02.]

WAC 296-27-02103 Covered employees. (1) You must record on the OSHA 300 Log the recordable injuries and illnesses of all employees on your payroll, whether they are labor, executive, hourly, salary, part-time, seasonal, or migrant workers. You also must record the recordable injuries and illnesses of all employees on your payroll, whether they are labor, executive, hourly, salary, part-time, seasonal, or migrant workers. You also must record the recordable injuries and illnesses of all employees on your payroll, whether they are labor, executive, hourly, salary, part-time, seasonal, or migrant workers. You also must record the recordable injuries and illnesses of all employees on your payroll, whether they are labor, executive, hourly, salary, part-time, seasonal, or migrant workers.

Note: If a self-employed person is injured or becomes ill while working for you, you are not required to report the injury or illness because they are not covered under WISHA or the recordkeeping requirements.

(2) You must record injuries and illnesses of employees from a temporary help service, employee-leasing service, or personnel supply service if you supervise these employees on a day-to-day basis.

(3) You must record an injury or illness of a contractor's employee who is working in your establishment if you supervise them on a day-to-day basis. However, if the contractor's employee is under the day-to-day supervision of the contractor, the contractor is responsible for recording the injury or illness.

(4) You must make sure that each injury and illness is recorded only once:

(a) Either on your OSHA 300 Log (if you provide day-to-day supervision); or
(b) On the other employer's OSHA 300 Log (if that company provides day-to-day supervision).

[Statutory Authority: RCW 49.17.010, 49.17.040, and 49.17.050. WSR 15-11-066, § 296-27-02103, filed 5/19/15, effective 7/1/15; WSR 02-01-064, §296-27-02103, filed 12/14/01, effective 1/1/02.]

WAC 296-27-02105 Annual summary. (1) At the end of each calendar year, you must:

(a) Review the OSHA 300 Log to verify that the entries are complete and accurate, and correct any deficiencies identified;
(b) Use the OSHA 300-A Log or equivalent form of your recorded injuries and illnesses to create your annual summary;
(c) Certify the annual summary; and
(d) Post the annual summary.

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(2) You must complete the annual summary by doing the following:

(a) Total the columns on the OSHA 300 Log (if you had no recordable cases, enter zeros for each column total); and
(b) Enter the calendar year covered, the company's name, establishment name, establishment address, annual average number of employees covered by the OSHA 300 Log, and the total hours worked by all employees covered by the OSHA 300 Log.

(c) Include the employee access and employer penalty statements found on the OSHA 300-A summary form when using an equivalent form as permitted by this chapter. For the definition of "equivalent form" see WAC 296-27-051.

(3) A company executive must certify that they have examined the OSHA 300 Log and that they reasonably believe, based on their knowledge of the process by which the information was recorded, that the annual summary is correct and complete.

(4) The company executive who certifies the log must be one of the following persons:

(a) An owner of the company (only if the company is a sole proprietorship or partnership);
(b) An officer of the corporation;
(c) The highest ranking company official working at the establishment; or
(d) The immediate supervisor of the highest ranking company official working at the establishment.

(5) You must post a copy of the annual summary in each establishment in a conspicuous place or places where notices to employees are customarily posted. You must ensure that the posted annual summary is not altered, defaced or covered by other material.

(6) You must post the summary no later than February 1 of the year following the year covered by the records and keep the posting in place until April 30.

[Statutory Authority: RCW 49.17.010, 49.17.040, and 49.17.050. WSR 15-11-066, § 296-27-02105, filed 5/19/15, effective 7/1/15; WSR 02-01-064, §296-27-02105, filed 12/14/01, effective 1/1/02.]

WAC 296-27-02107 Retention and updating. (1) You must save the OSHA 300 Log, the privacy case list (if one exists), the OSHA 300-A Annual Summary, and the OSHA 301 Incident Report forms for five years following the end of the calendar year that each of these records cover.

(2) You must update your stored OSHA 300 Logs during the five-year retention period to include newly discovered recordable injuries or illnesses and to show any changes that have occurred in the classification of previously recorded injuries and illnesses. If the description or outcome of a case changes, you must remove or line-out the original entry and enter the new information.

Note: During the five-year retention period, you are not required to update the OSHA 300-A Annual Summary of Work-Related Injuries or Illnesses, or the OSHA 301 Incident Reports, but you may do so if you wish.

[Statutory Authority: RCW 49.17.010, 49.17.040, and 49.17.050. WSR 15-11-066, § 296-27-02107, filed 5/19/15, effective 7/1/15; WSR 02-01-064, §296-27-02107, filed 12/14/01, effective 1/1/02.]

WAC 296-27-02109 Change in business ownership. If your business changes ownership, you are responsible for
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WAC 296-27-02111 Employee involvement. (1) Your employees and their representatives must be involved in the recordkeeping system in several ways. You must do the following:

(a) Establish a process for how employees report work-related injuries and illnesses to you.

(b) Inform each employee of how they are to report an injury or illness to you.

(c) Provide limited access to your injury and illness records for your employees and their representatives.

(2) Your employees, former employees, their personal representatives, and their authorized employee representatives have the right to access the OSHA injury and illness records, with some limitations, as discussed in subsection (3) through (7) of this section.

(3) When an employee, former employee, personal representative, or authorized employee representative asks for copies of your current or stored OSHA 300 Log(s) for an establishment the employee or former employee has worked in, you must give the requester a copy of the relevant OSHA 300 Log(s) by the end of the next business day.

(4) You must leave employee names and any other information on the OSHA 300 Log before giving copies to an employee, former employee, or an employee representative. However, to protect the privacy of injured and ill employees, you may not record the employee's name on the OSHA 300 Log for certain "privacy concern cases," as specified in WAC 296-27-01119(3).

(5) When an employee, former employee, or personal representative asks for a copy of the OSHA 301 Incident Report describing an injury or illness to that employee or former employee, you must give the requester a copy of the OSHA 301 Incident Report containing that information by the end of the next business day.

(6) When an authorized employee representative asks for copies of the OSHA 301 Incident Reports for an establishment where the agent represents employees under a collective bargaining agreement, you must give copies of those forms to the authorized employee representative within seven calendar days. You are only required to give the authorized employee representative information from the OSHA 301 Incident Report section titled "Tell us about the case." You must remove all other information from the copy of the OSHA 301 Incident Report or the equivalent substitute form that you give to the authorized employee representative.

(7) You may not charge for these copies the first time they are provided. However, if one of the designated persons asks for additional copies, you may assess a reasonable charge for retrieving and copying the records. An example of what a "reasonable charge" would be is what a print company would charge for copying the same documents.

WAC 296-27-02113 Prohibition against discrimination. (1) Employers are prohibited from discriminating against an employee for reporting a work-related fatality, injury or illness. Employees are also protected when they file a safety and health complaint, or ask for records which are required to be maintained by this section or exercise rights extended under WISHA.

(2) DOSH may not issue an injury and illness recordkeeping variance to a private sector employer. However, DOSH must recognize all recordkeeping variances issued by federal OSHA.

(3) DOSH may only grant an injury and illness recording and reporting variance to a state or local government employer within the state after obtaining approval to grant the variance from federal OSHA.

WAC 296-27-02117 Variances from the recordkeeping rule. (1) If you wish to keep records in a different manner from that prescribed in this section, you may submit a variance petition to the Assistant Secretary of Labor for Occupational Safety and Health, U.S. Department of Labor, Washington, DC 20210. You can obtain a variance only if you can show that your alternative recordkeeping system:

(a) Collects the same information as this section requires;

(b) Meets the purposes of the federal Occupational Safety and Health Act; and

(c) Does not interfere with the administration of the federal Occupational Safety and Health Act.

(2) You must include the following items in your variance petition:

(a) Your name and address;

(b) A list of the state(s) where the variance would be used;

(c) The address(es) of the business establishment(s) involved;

(d) A description of why you are seeking a variance;

(e) A description of the different recordkeeping procedures you propose to use;

(f) A description of how your proposed procedures will collect the same information as would be collected by this section and achieve the purpose of the act; and

(g) A statement that you have informed your employees of the petition by giving them or their authorized representative a copy of the petition and by posting a statement summarizing the petition in the same way as notices are posted under 29 C.F.R. 1903.2(a).

(3) The assistant secretary will take the following steps to process your variance petition:

(a) The assistant secretary will offer your employees and their authorized representatives an opportunity to submit written data, views, and arguments about your variance petition.
(b) The assistant secretary may allow the public to comment on your variance petition by publishing the petition in the Federal Register. If the petition is published, the notice will establish a public comment period and may include a schedule for a public meeting on the petition.  

(c) After reviewing your variance petition and any comments from your employees and the public, the assistant secretary will decide whether or not your proposed recordkeeping procedures will meet the purposes of the act, will not otherwise interfere with the act, and will provide the same information as required by this section. If your procedures meet these criteria, the assistant secretary may grant the variance subject to such conditions as he or she finds appropriate.  

(d) If the assistant secretary grants your variance petition, OSHA will publish a notice in the Federal Register to announce the variance. The notice will include the practices the variance allows you to use, any conditions that apply, and the reasons for allowing the variance.  

(4) You must comply with this section's requirements while the assistant secretary is reviewing your variance petition.  

(5) The assistant secretary may elect not to review your variance petition if it includes an element for which you have been cited and the citation is still under review by a court, an administrative law judge (ALJ), or the OSH Review Commission.  

(6) A variance may be revoked for good cause. The variance revocation procedures are the same as those followed to request the exception. In cases of willfulness or where necessary for public safety, the assistant secretary will:  

(a) Notify you in writing of the facts or conduct that may warrant revocation of your variance; and  

(b) Provide you, your employees, and authorized employee representatives with an opportunity to participate in the revocation procedures.  

(7) DOSH must recognize any recordkeeping or reporting variance issued by federal OSHA. 

[Statutory Authority: RCW 49.17.010, 49.17.040, and 49.17.050. WSR 15-11-066, § 296-27-02117, filed 5/19/15, effective 7/1/15; WSR 02-01-064, § 296-27-02117, filed 12/14/01, effective 1/1/02.]  

WAC 296-27-031 Reporting fatalities, inpatient hospitalizations, amputations, and losses of an eye as the result of work-related incidents. (1) You must report to DOSH within eight hours of a work-related incident that results in:  

(a) A fatality; or  

(b) An inpatient hospitalization of any employee.  

Notes:  

1. Secure the scene of work-related events that result in the death or inpatient hospitalization of any worker, refer to WAC 296-800-320.  

2. Do not move equipment involved (i.e., personal protective equipment (PPE), tools, machinery or other equipment), unless it is necessary to remove the victim or prevent further injuries, refer to WAC 296-800-32010.  

(2) You must report to DOSH within twenty-four hours of a work-related incident that results in either an amputation or the loss of an eye that does not require inpatient hospitalization.  

Notes:  

1. If the amputation or loss of an eye requires inpatient hospitalization, follow the eight-hour reporting requirement in WAC 296-27-031(1).  

2. Inpatient hospitalization that involves only observation or diagnostic testing is not a reportable inpatient hospitalization.  

(3) If you do not learn about a reportable fatality, inpatient hospitalization, amputation, or loss of an eye at the time it takes place, you must make the report to DOSH within the following time periods after the fatality, inpatient hospitalization, amputation, or loss of an eye is reported to you or any of your agents:  

(a) Eight hours for a fatality or an inpatient hospitalization of one or more employees.  

(b) Twenty-four hours for an amputation or a loss of an eye that does not require inpatient hospitalization.  

(4) If you do not learn right away that the reportable fatality, inpatient hospitalization, amputation, or loss of an eye was the result of a work-related incident, you must make the report to DOSH within the following time periods after you or any of your agents learn that the reportable fatality, inpatient hospitalization, amputation, or loss of an eye was the result of a work-related incident:  

(a) Eight hours for a fatality or an inpatient hospitalization of one or more employees.  

(b) Twenty-four hours for an amputation or a loss of an eye that does not require inpatient hospitalization.  

(5) You must report the fatality, inpatient hospitalization, amputation, or loss of an eye that does not require inpatient hospitalization.  

(6) If the local office is closed, you must report a fatality, inpatient hospitalization, amputation, or the loss of an eye in the required time frame using one of the following methods:  

(a) By telephone to the department's toll-free telephone number, 1-800-4BE-SAFE (1-800-423-7233) or in person to the Labor and Industries' Division of Occupational Safety and Health (DOSH) office located nearest to the site of the incident;  

(b) By telephone to the OSHA toll-free telephone number, 1-800-321-OSHA (1-800-321-6742); or  

(c) To DOSH by any other means.  

(7) You must provide DOSH with the following information for each fatality, inpatient hospitalization, amputation, or loss of an eye:  

(a) The establishment name;  

(b) The location of the work-related incident;  

(c) The time and date of the work-related incident;  

(d) The type of reportable event (i.e., fatality, inpatient hospitalization, amputation, or loss of an eye);  

(e) The number of employees who suffered a fatality, inpatient hospitalization, amputation, or loss of an eye;  

(f) The names of the employees who suffered a fatality, inpatient hospitalization, amputation, or loss of an eye;  

(g) Your contact person and their phone number; and  

(h) A brief description of the work-related incident.  

(8) If a fatality does not occur during or right after the work-related incident, you must only report it to DOSH if the fatality occurs within thirty days of the work-related incident.  

(9) You do not have to report an incident that resulted in a fatality, inpatient hospitalization, amputation, or loss of an eye to DOSH if it occurred on a commercial or public trans-
portation system (e.g., airplane, train, subway, or bus). However, the fatality, inpatient hospitalization, amputation, or loss of an eye must be recorded on your OSHA injury and illness records, if you are required to keep such records.

(10) You must report to DOSH when a heart attack occurs in the work environment that results in a fatality or inpatient hospitalization. DOSH will decide whether to investigate the event, depending on the circumstances of the heart attack.

(11) You must only report to DOSH each inpatient hospitalization that involves medical care or treatment. Inpatient hospitalization involving only observation or diagnostic testing need not be reported.


**WAC 296-27-03101 Providing records to government representatives.** (1) When an authorized government representative asks for the records you keep under this section, you must provide copies of the records within four business hours.

(2) If you maintain the records at a location in a different time zone, you may use the business hours of the establishment at which the records are located when calculating the deadline.

[Statutory Authority: RCW 49.17.010, 49.17.040, and 49.17.050. WSR 15-11-066, § 296-27-03101, filed 5/19/15, effective 7/1/15; WSR 02-01-064, § 296-27-03101, filed 12/14/01, effective 1/1/02.]

**WAC 296-27-03103 Annual OSHA injury and illness survey.** (1) If you receive OSHA's annual survey form, you must fill it out and send it to OSHA or OSHA's designee, as stated on the survey form. You must report the following information for the year described on the form:

(a) The number of workers you employed;
(b) The number of hours worked by your employees; and
(c) The requested information from the records that you keep under this section.

(2) Each year, OSHA sends injury and illness survey forms to employers in certain industries. You do not have to send injury and illness data to OSHA unless you receive a survey form.

(3) You must send the survey reports to OSHA, or OSHA's designee, by mail or other means described in the survey form, within thirty calendar days, or by the date stated in the survey form, whichever is later.

(4) If you are exempt from keeping injury and illness records under WAC 296-27-00103 through 296-27-00107, OSHA may inform you in writing that it will be collecting injury and illness information from you in the following year. If you receive such a letter, you must keep the injury and illness records required by WAC 296-27-01103 through 296-27-01115 and make a survey report for the year covered by the survey.

(5) Washington state employers must respond to the OSHA survey form if they receive one.

(6) Nothing in this section affects DOSH's or federal OSHA's statutory authority to investigate conditions related to occupational safety and health.

[Statutory Authority: RCW 49.17.010, 49.17.040, and 49.17.050. WSR 15-11-066, § 296-27-03103, filed 5/19/15, effective 7/1/15; WSR 02-01-064, § 296-27-03103, filed 12/14/01, effective 1/1/02.]

**WAC 296-27-03105 Requests from the Bureau of Labor Statistics (BLS) for data.** (1) If you receive a Survey of Occupational Injuries and Illnesses form from the BLS, or a BLS designee, you must promptly complete the form and return it following the instructions contained on the survey form.

(2) Each year, the BLS sends injury and illness survey forms to randomly selected employers and uses the information to create the nation's occupational injury and illness statistics. In any year, some employers will receive a BLS survey form and others will not. You do not have to send injury and illness data to the BLS unless you receive a survey form.

(3) If you receive a Survey of Occupational Injuries and Illnesses form from the BLS, or a BLS designee, you must promptly complete the form and return it, following the instructions contained on the survey form.

(4) If you are exempt from keeping injury and illness records under WAC 296-27-00103 through 296-27-00107, the BLS may inform you in writing that it will be collecting injury and illness information from you in the coming year. If you receive such a letter, you must keep the injury and illness records required by WAC 296-27-01103 through 296-27-01115 and make a survey report for the year covered by the survey.

(5) Washington state employers must respond to the BLS survey form if they receive one.

[Statutory Authority: RCW 49.17.010, 49.17.040, and 49.17.050. WSR 15-11-066, § 296-27-03105, filed 5/19/15, effective 7/1/15; WSR 02-01-064, § 296-27-03105, filed 12/14/01, effective 1/1/02.]

**WAC 296-27-051 Definitions.**

[Statutory Authority: RCW 49.17.010, [49.17].040, and [49.17].050. WSR 02-01-064, § 296-27-051, filed 12/14/01, effective 1/1/02.]

**WAC 296-27-05101 Definitions. Amputation.** The traumatic loss of an appendage, such as an upper or lower limb (or part of the limb) or other external body part that has been severed or cut off either completely or partially at the time of the injury, or is surgically removed due to irreparable damage. Amputations may or may not include bone loss.

Note: Amputations include fingertip amputations and amputations of body parts that have since been reattached. Amputations do not include loss of an eye, broken or chipped teeth, scalpings, or avulsions, such as deglovings, where the skin and tissue have been torn away from the underlying subcutaneous tissue, tendons, muscle, or bone.

**Authorized employee representative.** An authorized collective bargaining agent of employees.

**Authorized government representative.** A representative of the Secretary of Labor, conducting an inspection or investigation under the act, a representative of the Secretary of Health and Human Services (including the National Institute for Occupational Safety and Health (NIOSH)) conduct-
First aid. For the purpose of this chapter, first aid only includes the following:

(a) Using a nonprescription medication at nonprescription strength (for medications available in both prescription and nonprescription form, a recommendation by a physician or other licensed health care professional to use a nonprescription medication at prescription strength is considered medical treatment for recordkeeping purposes);

(b) Administering tetanus immunizations (other immunizations, such as Hepatitis B vaccine or rabies vaccine, are considered medical treatment);

(c) Cleaning, flushing, or soaking wounds on the surface of the skin;

(d) Using wound coverings such as bandages, Band-Aids™, gauze pads, etc., or using butterfly bandages or Steri-strips™ (other wound closing devices such as sutures, staples, etc., are considered medical treatment);

(e) Using hot or cold therapy;

(f) Using any nonrigid means of support, such as elastic bandages, wraps, nonrigid back belts, etc., (devices with rigid stays or other systems designed to immobilize parts of the body are considered medical treatment for recordkeeping purposes);

(g) Using temporary immobilization devices while transporting an accident victim (e.g., splints, slings, neck collars, back boards, etc.);

(h) Drilling of a fingernail or toenail to relieve pressure, or draining fluid from a blister;

(i) Using eye patches;

(j) Removing foreign bodies from the eye using only irrigation or a cotton swab;

(k) Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs, or other simple means;

(l) Using finger guards;

(m) Using massages (physical therapy or chiropractic treatment are considered medical treatment for recordkeeping purposes); or

(n) Drinking fluids for relief of heat stress.

Injury or illness. An abnormal condition or disorder. Injuries include cases such as, but not limited to, a cut, fracture, sprain, or amputation. Illnesses include both acute and chronic illnesses, such as, but not limited to, a skin disease, respiratory disorder, or poisoning. Injuries and illness are recordable only if they are new, work-related cases that meet one or more of this section’s recording criteria.

Inpatient hospitalization. To be admitted into a hospital or equivalent facility for medical treatment.

Loss of an eye(s). The physical removal of an eye occurring either at the time of injury or is surgically removed due to irreparable damage. The loss of sight without the removal is not reportable, unless the worker is admitted as an inpatient hospitalization after losing sight as a result of a worker-related incident, then it is reportable within the eight-hour time frame specified in WAC 296-27-031(1).

Medical treatment. The management and care of a patient to combat disease or disorder. For the purposes of this section, medical treatment does not include:

(a) Visits to a physician or other licensed health care professional solely for observation or counseling;
and the age correction tables were developed by the National Institute for Occupational Safety and Health in the criteria document entitled "Criteria for a Recommended Standard...Occupational Exposure to Noise," ((HSM)-11001).

(2) For each audiometric test frequency:
   (a) Determine from Tables A-1 or A-2 the age correction values for the employee by:
      (i) Finding the age at which the most recent audiogram was taken and recording the corresponding values of age corrections at 1000 Hz through 6000 Hz;
      (ii) Finding the age at which the baseline audiogram was taken and recording the corresponding values of age corrections at 1000 Hz through 6000 Hz.
   (b) Subtract the values found in step (a)(ii) from the value found in step (a)(i).
   (c) The differences calculated in step (b) represent that portion of the change in hearing that may be due to aging.

**EXAMPLE:** Employee is a 32-year-old male. The audiometric history for his right ear is shown in decibels below.

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<th>Frequency (Hz)</th>
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<tr>
<td>27</td>
<td>10 5 15 15 20</td>
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The audiogram at age 27 is considered the baseline since it shows the best hearing threshold levels. Asterisks have been used to identify the baseline and most recent audiogram. A threshold shift of 20 dB exists at 4000 Hz between the audiograms taken at ages 27 and 32.

(11/22/16)
(5) is subtracted from the adjusted annual audiogram hearing threshold at 4000 Hz (22). Thus the age-corrected threshold shift would be 17 dB (as opposed to a threshold shift of 20 dB without age correction).

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TABLE A-1 - AGE CORRECTION VALUES IN DECIBELS FOR MALES

TABLE A-2 - AGE CORRECTION VALUES IN DECIBELS FOR FEMALES
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</tr>
</tbody>
</table>

[Statutory Authority: RCW 49.17.010, 49.17.040, and 49.17.050. WSR 15-11-066, § 296-27-061, filed 5/19/15, effective 7/1/15. Statutory Authority: RCW 49.17.010, 49.17.040, 49.17.050, and 49.17.060. WSR 03-24-085, § 296-27-061, filed 12/2/03, effective 1/1/04.]