## OSHA's Form 300A (Rev. 01/2004) Summary of Work-Related Injuries and Illnesses



U.S. Department of Labor
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the log. If you had no cases write "0."

Employees former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 1904.35, in OSHA's Recordkeeping rule, for further details on the access provisions for these forms.

Number of Cases				
Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases	
(G)	(H)	(1)	(J)	
Number of Days				
Total number of days away from work		Total number of days of job transfer or restriction		
31 (K)	_	0 (L)	-	
Injury and Illness 1	Гуреѕ			
Total number of				
(1) Injury	4	(4) Poisoning	0	
(2) Skin Disorder	0	(5) Hearing Loss	0	
(3) Respiratory Condition	0	(6) All Other Illnesses	0	

## Post this Summary page from February 1 to April 30 of the year following the year covered by the form

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.

Establishment information									
	Your es	stablishment name University of W	ashington,	Airlift Northwest					
	Street 6505 Perimeter Rd S, Suite 200								
	City	Friday Harbor	State	WA		Zip 98108			
	Industr	ndustry description (e.g., Manufacture of motor truck trailers)  Transport of Patients to Hospitals							
)R	Standa	ard Industrial Classification (SIC), if kno	wn (e.g., SI	C 3715)					
	North American Industrial Classification (NAICS), if known (e.g., 336212) 621910								
mp	loyme	ent information							
Α	nnual a	average number of employees	132						
Total hours worked by all employees last year		210,619							
ign	here								
ı	Knowii	ngly falsifying this document may re	sult in a fir	ne.					
	I certify	that I have examined this document a tee.	nd that to th	ne best of my knowle	dge the entries are true,	accurate, and			
	Margaret Shepherd Digitally signed by Margaret Shepherd Date: 2021.01.29 12:27:59 -08'00'				Chief of Staff, Office	of the President			
-	Margaret A. Shepherd			-	,	Γitle			
	206-543-7262 (EH&S)				January 29, 2021				
	Phone					Date			