



**Transportation
Security
Administration**

**OFFICE OF OCCUPATIONAL SAFETY,
HEALTH AND ENVIRONMENT**

**TSA MANAGEMENT DIRECTIVE No. 2400.5
MISHAP INVESTIGATIONS, REPORTING,
AND RECORDKEEPING**

1. **PURPOSE:** This Directive establishes procedures for investigating, reporting, and recording workplace mishaps and related incidents that result in, or have serious potential for, injury, illness, or death to Transportation Security Administration (TSA) employees and covered contract employees, or damage to TSA facilities, property, and equipment. The purpose of the procedures prescribed in this Directive is to establish a framework for collecting and compiling statistical data that will be used to identify workplace trends, as well as causal relationships, and to better target agency resources to make workplaces safer and more healthful for all employees.
2. **SCOPE:** This Directive applies to all TSA supervisors, managers, employees, and covered contract employees.
3. **AUTHORITIES:**
 - A. Occupational Safety and Health Act of 1970 (OSH Act of 1970), Section 19, Federal Agency Safety Programs and Responsibilities.
 - B. Executive Order 12196 (E.O. 12196), Occupational Safety and Health Programs for Federal Employees, dated February 26, 1980.
 - C. Department of Homeland Security (DHS) Directive MD 5200.1, Occupational Safety and Health Programs.
 - D. Title 29, Code of Federal Regulations, Part 1960 (29 CFR 1960), Subpart I, Recordkeeping and Reporting Requirements.
 - E. Title 29, Code of Federal Regulations, Part 1904 (29 CFR 1904), Recording and Reporting Occupational Injuries and Illnesses.
 - F. Title 29, Code of Federal Regulations, Part 1960.29 (29 CFR 1960.29), Accident Investigation.
4. **DEFINITIONS:**
 - A. Covered Contract Employees. For purposes of this Directive, individuals who are not employees of the TSA, but whose work is performed in TSA workspaces and supervised by a TSA employee on a day-to-day basis.
 - B. Designated Agency Safety and Health Official (DASHO). An individual responsible for the management and administration of the agency's occupational safety and health program, as designated or appointed by the head of the agency, in accordance with 29 CFR

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1960.6. At TSA Headquarters, the DASHO is the Chief Administrative Officer within the Office of Finance and Administration.

- C. Designated Occupational Safety and Health Official (DOSHO). An individual designated by management who has sufficient authority to plan and budget for necessary staff, equipment, materials, and training to implement an effective occupational safety and health program for the organization.
- D. Establishment. A single physical location where TSA operations and activities are conducted, and which may be referred to as field activity, regional office, area office, installation, or facility. Where TSA employees do not work at a single physical location, the establishment is represented by main or branch offices from which employees carry out their activities.
- E. First Aid. Any initial one-time treatment and any follow-up visit for observation of minor injuries, such as scratches, cuts, burns, and splinters, which do not ordinarily require medical care. Such one-time treatment and follow-up visit for observation is considered first aid, even though provided by a physician or medical professional, and is not recorded on the Occupational Safety and Health Administration (OSHA) 300 Log.
- F. Incidence Rate. A figure representing the number of injuries and/or illnesses per 100 full-time workers and calculated as $(N/EH) \times 200,000$, where N is the number of injuries and/or illnesses; EH is the total number of hours worked by all employees during the calendar year; and 200,000 is the base for 100 full-time equivalent workers (working 40 hours per week, 50 weeks per year).
- G. Incident. Any event that narrowly misses being a mishap in which the circumstances indicate a serious potential for substantial damage, injury, or death.
- H. Investigation. The determination of the facts of a mishap by inquiry, empirical observation, and examination and an analysis of these facts to establish causal and contributing factors of the mishap and the corrective measures that must be adopted to prevent its recurrence.
- I. Medical Treatment. Medical treatment means the management and care of a patient to combat disease or disorder. For the purposes of OSHA's Recordkeeping standard (29 CFR 1904) and this Directive, medical treatment does NOT include: (1) visits to a physician, hospital, or other licensed health care facility for observation or counseling; (2) diagnostic procedures, such as x-rays and blood tests, including the administration of prescription medications used solely for diagnostic purposes (such as eye drops to dilate pupils); and (3) first aid. (Additional examples of first aid are provided in 29 CFR 1904.7(b)(5)(ii)).
- J. Mishap. An unplanned event or series of events resulting in an occupational injury, illness, or death; or damage to a facility, equipment, or property involving TSA employees and covered contract employees. See also the definition for "serious mishap."
- K. Mishap/Incident/Unsafe or Unhealthful Working Conditions Investigation Report (TSA Form 2401). A written report (see Attachment A) that will be used to document investigations of recordable and non-recordable mishaps, or incidents. It will also be used

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to serve as an Initial Written Notification to be sent to the Office of Occupational Safety, Health, and Environment at TSA Headquarters, in the event of a serious mishap. The form may be downloaded from the [Forms page](#) on the TSA intranet.

- L. Motor Vehicle. Any TSA, General Services Administration (GSA) leased, privately owned, or commercially owned or leased motor vehicle used for official TSA business.
- M. Non-Recordable Deaths, Occupational Injuries, and Occupational Illnesses. Minor medical outcomes as well as conditions that may be connected to work, but which did not actually arise from the performance of work are not recordable under the OSHA recordkeeping standard and are not recorded on the OSHA 300 Log (29 CFR 1904.5). Examples include, but are not limited to, injuries and illnesses requiring only first aid; pre-existing musculoskeletal disorders unless aggravated by one's employment; injuries from a vehicle accident while commuting to work; injuries as a result of a terrorist attack; death due to natural causes that are unrelated to the work environment; or attempted or consummated suicide.

Note: Some fatalities, injuries, and illnesses, while not recordable under OSHA, may be considered to have occurred in the performance of duty under provisions of the Federal Employees' Compensation Act (FECA) and are reportable to the Department of Labor. Please contact the Human Resources organization for more information.

- N. Occupational Illness. A physiological harm or loss of capacity produced by systemic infection; continued or repeated stress or strain; exposure to toxins, poisons, fumes, or other continued and repeated exposures to conditions of the work environment over a long period.
- O. Occupational Injury. A wound or other condition of the body caused by external force, including stress or strain. The injury is identifiable as to time and place of occurrence; part or function of the body affected; and is caused by a specific event or incident, or series of events or incidents, within a single day or work shift.
- P. OSHA 300 Log. A U.S. Department of Labor, Occupational Safety and Health Administration (OSHA) form used to log recordable work-related fatalities, injuries, and illnesses. A Microsoft Excel-formatted log should be downloaded for use from the [OSHA website](#).
- Q. OSHA Injury and Illness Incident Report (OSHA 301 form). A report required by 29 CFR 1904.29 to record additional information corresponding to each injury or illness entered on the OSHA 300 Log. OSHA permits an equivalent form to be used, provided it has the same information as the OSHA 301 form and is readable and understandable. *(TSA has determined that the Mishap/Incident/Unsafe or Unhealthful Working Conditions Investigation Report (TSA Form 2401) will be used in lieu of the OSHA 301 until an automated mishap and incident reporting system is fielded (see Attachment A).*
- R. Privacy Concern Cases. Cases where the identities of individuals will not be entered on the OSHA 300 Log, if they have suffered (1) Injury or illness to an intimate body part or the reproductive system; (2) An injury or illness resulting from a sexual assault; (3) Mental

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illness; (4) HIV infection, hepatitis, or tuberculosis; or (5) Needlestick injuries and cuts from sharp objects that are contaminated with another person's blood or potentially infectious material. A separate, confidential list must be maintained to protect these individuals' privacy.

- S. Privileged Safety Information. Statements, reports, photographs, or testimony given to a mishap/incident investigation team leader or Technically Qualified Occupational Safety and Health Staff during the course of a safety investigation.
- T. Property Damage. Damage to facilities, equipment, or property owned, leased, or under the control of TSA. Examples include privately owned or commercially leased/rented motor vehicles; facilities contracted for TSA use; and airport explosives detection devices.
- U. Recordable Fatality, Injury, or Illness. A work-related fatality, injury, or illness involving loss of consciousness, restricted work activity, job transfer, days away from work (not including the first day of injury/illness), or medical treatment beyond first aid. Title 29, Code of Federal Regulations, Part 1904 lists additional recordable conditions and situations, and should be consulted. Only recordable fatalities, injuries, and illnesses will be recorded on an OSHA 300 Log.
- V. Recordkeeping. The process of recording and documenting work-related injuries, illnesses, and fatalities for the purpose of identifying unsafe and unhealthful working conditions, and establishing program priorities.
- W. Reporting. Communicating to OSHA certain required information relating to serious mishaps, as required in 29 CFR 1904, Subpart E.
- X. Serious Mishaps. On the job events involving a fatality or hospitalization of three or more persons overnight for other than observation, or property damage in excess of \$100,000. See the forthcoming TSA MD 2400.6, Serious Mishap Investigation, for a more complete definition.
- Y. Technically Qualified Occupational Safety and Health Staff.
 - (1) Safety Professionals – Occupational safety and health specialists, occupational safety and health managers, safety engineers, industrial hygienists; or equally qualified agency or non-Governmental personnel who meet the basic qualifications as defined by personnel standards.
 - (2) Collateral Duty Safety and Health Personnel – Persons having occupational safety and health training and experience necessary to identify safety and health hazards and perform workplace inspections.
- Z. Work Environment. The work environment means physical locations, including equipment and materials used by the employee, and work practices followed by the employee during the course of his or her work.

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- AA. Work-Relatedness. An injury or illness is work-related if an event or exposure in the work environment either caused or contributed to the resulting condition or significantly aggravated a pre-existing injury or illness.

5. RESPONSIBILITIES:

- A. The Director, Office of Occupational Safety, Health, and Environment is responsible for:
- (1) Investigating, at his/her discretion, any mishap or incident, or delegating the function to a qualified third party technical investigator.
 - (2) Ensuring that technically qualified occupational safety and health staff investigate, collect, and analyze sufficient information to determine causal and contributing factors of the mishap and make recommendations for corrective action.
 - (3) Collecting, classifying, and maintaining data on serious and other mishaps and incidents for the purpose of determining TSA's occupational safety and health prevention needs.
 - (4) Reviewing every TSA employee fatality investigation report to determine whether or not it was a work-related mishap.
 - (5) Providing the DASHO and other internal or external customers periodic reports and updates on the agency's injury and illness incidence rates and/or lessons learned from the investigation of serious and other mishaps and incidents.
- B. Designated Occupational Safety and Health Officials (DOSHOs) are responsible for:
- (1) Ensuring that procedures are in place, including designation of responsible individuals, to carry out the reporting requirements in paragraph 6.B.(1).
 - (2) Ensuring that injuries, illnesses, and fatalities are recorded in accordance with the procedures in this Directive and applicable OSHA standards.
 - (3) Ensuring that all mishaps and incidents are investigated, giving priority to the investigation of serious mishaps, and taking prompt steps to correct workplace hazards or alter work procedures and practices as necessary to protect employees.
 - (4) Using mishap information to identify trends and establish program priorities.
- C. All Staff Directors, Area Directors in Aviation Operations, and Managers and Supervisors are responsible for:
- (1) Reporting, investigating, analyzing, and overseeing the maintenance of records for mishaps and incidents in accordance with the requirements set forth in this Directive, OSHA standards, and DOSHO procedures.

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- (2) Ensuring that the TSA Form 2401, Mishap/Incident/Unsafe or Unhealthful Working Conditions Investigation Report, is completed for work-related mishaps and incidents.
 - (3) Reviewing every work-related injury, illness, or fatality to determine if it is OSHA-recordable (see definition 4.U.).
 - (4) Ensuring that each recordable injury, illness, or fatality is entered into the OSHA 300 Log within seven calendar days of receiving information that a recordable injury or illness has occurred.
 - (5) Serving as the mishap/incident investigation team leader for mishaps not defined as serious (that is, are not events that involve fatalities, inpatient hospitalization of 3 or more employees, or property damage valued in excess of \$100,000). This function may be delegated, but should remain a management responsibility. Serious mishap investigations are covered in TSA MD 2400.6.
 - (6) Using mishap/incident information to identify and correct unsafe and unhealthful working conditions, procedures, and practices.
- D. Technically Qualified Occupational Safety and Health Staff is responsible for:
- (1) Assessing the validity of reports of occupational injuries and illnesses, incidents, and facility, equipment, and property damage, and determining when investigations are appropriate.
 - (2) Assisting the mishap investigation team leader in collecting and analyzing information and factual data on the mishap or incident, determining the findings, developing and initiating corrective measures, and completing TSA Form 2401, Mishap/Incident/Unsafe or Unhealthful Working Condition Investigation Report.
 - (3) Maintaining the OSHA 300 Log and checking its accuracy at the end of each calendar year; preparing and ensuring the posting of the annual summary (OSHA 300A); maintaining a sequentially numbered case file or log of investigations of mishaps and incidents in accordance with paragraph 6.B.(3)(e).
 - (4) Coordinating with the Safety Action Team, affected staffs, and subject matter experts to determine the most effective corrective measures and the appropriate safety communications channels to alert local staff and other field units of potential hazards.
- E. Employees are responsible for:
- (1) Performing work operations and activities in a safe and healthful manner, including the use of personal protective equipment when required.
 - (2) Reporting to his or her supervisor/manager orally or in writing any injury or illness; incidents, which if not addressed could lead to future injury; or damage to facility, equipment, or property arising in the workplace, work site, or from any work condition, procedure, or practice.

6. POLICY AND PROCEDURES:

A. POLICY

The Transportation Security Administration will:

- (1) Investigate, report, and maintain records on work-related fatalities, injuries, and illnesses, and other mishaps and incidents, in accordance with OSHA standards, and TSA and DHS Directives.
- (2) Analyze mishap data to identify trends and develop corrective measures to reduce the occurrence of work-related fatalities, injuries, and illnesses, incidents, and facility, equipment, and property damage.

B. PROCEDURES

Designated Occupational Safety and Health Officials will ensure that procedures are developed for their respective line of business to include the following reporting, recording, and investigation requirements.

(1) Reporting Requirements.

(a) Reporting to OSHA.

- i. Within eight hours after the death of any employee from a work-related mishap or the in-patient hospitalization of three or more employees as a result of a work-related mishap, the responsible individual designated by the DOSHO (see paragraph 5.B.(1)) must telephone or visit the Area Office of the Occupational Safety and Health Administration nearest to the site of the mishap. Leaving a message on OSHA's answering machine, or sending an e-mail or fax is prohibited. If reports cannot be made during normal OSHA business hours, then make reports through the OSHA telephone hot line: 1-800-321-OSHA (6742). Provide OSHA the following information:
 - Establishment name;
 - Location of the mishap;
 - Time of the mishap;
 - Number of fatalities or hospitalized employees;
 - Names of injured or deceased employees;
 - Name and telephone number of the TSA contact person most familiar with the mishap; and
 - Brief description of the mishap.
- ii. An employee fatality caused by a heart attack that occurs at work also must be reported to the local OSHA Area Office within 8 hours. The area OSHA director will decide whether to investigate, depending on the circumstances of the heart attack.

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- iii. OSHA reporting exceptions. Fatalities and/or multiple hospitalizations that involve a commercial or public transportation system, such as an airplane, train, subway, vessel, or bus accident, do not have to be reported to OSHA because other authorities (for example, local police or National Transportation Safety Board) have jurisdiction for investigating them.
- (b) Notifying the Transportation Security Operations Center (TSOC).
- i. The responsible individual also must contact the TSOC (703-563-3240) and provide the same information within the same time frames as for reporting to OSHA in 6.B.(1)(a) above regarding the death of any employee from a work-related mishap or a heart attack, or the in-patient hospitalization of three or more employees as a result of a work-related mishap.
 - ii. In addition, TSOC must be notified of fatalities and hospitalizations described as OSHA reporting exceptions in paragraph 6.B.(1)(a)iii. above, and property/equipment damage in excess of \$100,000.
 - iii. TSOC notification procedures will ensure that the Office of Occupational Safety, Health, and Environment at TSA Headquarters is notified promptly of the above mishaps.
- (c) Reporting motor vehicle mishaps.
- i. TSA-owned motor vehicles. The responsible individual must report mishaps involving TSA-owned motor vehicles in accordance with procedures in the Motor Vehicle Accident Reporting Kit provided by the TSA Fleet and Transportation Division, TSA-17.
 - ii. General Services Administration (GSA) motor vehicles. GSA motor vehicle accidents require the completion of the Operator's Report of Motor Vehicle Accident, Standard Form SF-91, and the Statement of Witness(es), Standard Form SF-94 (if applicable), when a GSA-owned or leased motor vehicle is involved in a mishap relating to a TSA operation or activity. Contact the TSA Fleet and Transportation Division for details.
 - iii. The responsible individual must also document motor vehicle mishaps and associated injuries (if any) on TSA Form 2401, Mishap/Incident/Unsafe or Unhealthful Working Condition Investigation Report.
- (2) Recordkeeping Requirements. The Transportation Security Administration adopts 29 CFR 1904 as the authority for collecting and maintaining agency injury and illness data because of its usefulness in identifying injury and illness trends.
- (a) The OSHA 300 Log and TSA Form 2401, Mishap/Incident/Unsafe or Unhealthful Working Conditions Investigation Report, will be used to record work-related mishaps and incidents until an automated system is fielded.

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Note: Electronic versions of the forms should be used to facilitate ease in transfer of records to the Office of Occupational Safety, Health, and Environment (OSHE Office) at TSA Headquarters. A Microsoft Excel-formatted OSHA 300 Log can be downloaded for use from the [OSHA website](#) or from the [TSA OSHE Office website](#). Form 2401 can be downloaded from the TSA [Forms Page](#) on the Intranet.

- (b) All mishaps and incidents will be reported on TSA Form 2401, Mishap/Incident/Unsafe or Unhealthful Working Conditions Investigation Report. If an injury, illness, or fatality reported on TSA Form 2401 meets the definition of “recordable,” it will also be entered on the OSHA 300 Log.
 - (c) The OSHA 300 Log (or successor) must be maintained at each establishment for recordable work-related injuries and illnesses involving TSA employees and covered contract employees. An electronic copy must be e-mailed at the close of each calendar quarter to OSHA_TSAReporting@DHS.gov.
 - (d) Recordable injuries and illnesses must be entered on the OSHA 300 Log within seven calendar days following management notification of a mishap.
 - (e) Entries will be reviewed as needed to ensure that they are complete and correct.
 - (f) Names of employees who are “privacy concern cases” will not be entered on the OSHA 300 Log, but will be maintained in a separate, confidential list for updating purposes. Care must be taken to add the case to the log for counting purposes, but in place of the name will be the words “privacy concern case.” (29 CFR 1904.29 has additional information on logging these cases.)
 - (g) At the end of each calendar year, the OSHA 300 Log will be verified for completeness and accuracy, and an annual summary (OSHA Form 300A) will be created and posted in accordance with 29 CFR 1904.32. A Microsoft Excel-formatted OSHA Form 300A can be downloaded from the [OSHA website](#).
- (3) Investigation Requirements.
- (a) All mishaps and incidents will be investigated within the timeframes specified below, including those involving only facility, property, and equipment damage, to determine the causal and contributing factors. Priority will be given to serious mishaps and incidents with more serious consequences.
 - i. Investigations of serious mishaps and imminent danger incidents will begin within 24 hours as provided in paragraph 6.B.(3)(d), below.
 - ii. Investigations of all other mishaps and incidents will begin within 3 working days.

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- (b) All investigations must be conducted with support from technically qualified occupational safety and health staff or a third party technical investigator to evaluate mishaps based on their complexity and severity. The level of professional expertise must be commensurate with the seriousness of the mishap or incident.
- (c) Form 2401, Mishap/Incident/Unsafe or Unhealthful Working Condition Investigation Report will be used when investigating any mishap or incident.
- (d) Serious Mishap Investigation.
 - i. TSA Form 2401, Mishap/Incident/Unsafe or Unhealthful Working Conditions Investigation Report, will be used as the initial written notification for mishaps determined to be serious (such as fatalities and inpatient hospitalization of 3 or more employees), and imminent danger incidents having a serious potential for substantial damage, injury, or death.
 - ii. A copy of TSA Form 2401, Mishap/Incident/Unsafe or Unhealthful Working Conditions Investigation Report, must be sent electronically to the Director, Occupational Safety and Health at TSA Headquarters, the affected DOSHO, and the occupational safety and health manager serving the area (or the Chair of the local Safety Action Team) within 24 hours following the time of the mishap.

NOTES:

- 1. This action is in addition to the 8-hour reporting requirement in paragraph 6.B.(1).
 - 2. A copy of a report involving security-related controls or procedures must also be provided to the TSA Headquarters Office of Security.
 - iii. Serious mishaps and incidents may be subject to a more thorough investigation process once assessed by the OSHE Office at TSA Headquarters (see TSA MD 2400.6, Serious Mishap Investigation).
- (e) A sequentially numbered case file or log must be assigned locally for purposes of maintaining accurate records of all investigations and any follow-up responses.
 - (f) TSA Form 2401, Mishap/Incident/Unsafe or Unhealthful Working Conditions Investigation Reports, will be treated confidentially to ensure that privileged safety information is protected.
- (4) TSA Records Retention.
- (a) The OSHA 300 Log, the privacy case list (if one exists), the annual summary, and associated Mishap/Incident/Unsafe or Unhealthful Working Conditions Investigation Reports must be retained for five years following the end of the

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calendar year that the records cover. Copies of the records will be stored electronically when the automated TSA safety information database is fielded.

- (b) Other Mishap/Incident/Unsafe or Unhealthful Working Conditions Investigation Reports will be kept accessible for a total of 6 years. Copies of the reports will be stored electronically when the automated TSA safety information database is fielded.

(5) Providing Records to Government Representatives.

- (a) The following Government agencies are authorized under 29 CFR 1904 to request TSA injury and illness information:
 - i. A representative of the Secretary of Labor (including the Occupational Safety and Health Administration) conducting an inspection or investigation; or
 - ii. A representative of the Secretary of Health and Human Services (including the National Institute for Occupational Safety and Health – NIOSH) conducting an inspection or investigation.
- (b) Requested records must be provided within four business hours of the request. Time zone differentials may be considered when fulfilling the request.

7. EFFECTIVE DATE AND IMPLEMENTATION:

This policy is effective immediately upon signature.

APPROVAL



4/2/04
Date

Robert W. Gardner
Assistant Administrator for Finance and
Administration/CFO

Filing Instructions:	File with OSHE Office Management Directives
Effective Date:	April 2, 2004
Review Date:	April 2, 2005
Distribution:	TSA Assistant Administrators, Office Directors
Point Of Contact:	CAO/OSHE Office, Donna Kistoo, 571-227-2291

**OFFICE OF OCCUPATIONAL SAFETY, HEALTH, AND ENVIRONMENT
MISHAP/INCIDENT/UNSAFE OR UNHEALTHFUL WORKING
CONDITIONS INVESTIGATION REPORT**



**Transportation
Security
Administration**

Sect. A. G E N E R A L I N F O R M A T I O N	1. DATE AND TIME OF EVENT:	2. DATE AND TIME PREPARER NOTIFIED:	3. IS THIS A REVISION OF A PREVIOUS REPORT: Yes <input type="checkbox"/> NO <input type="checkbox"/>	4. CASE NUMBER: (Example: TSA-BWI-001-03)
	5. OFFICE LOCATION: (Example: TSA Field Office, O'Hare International Airport)			
	6. NATURE OF EVENT: (check only one box reflecting EVENT having greatest significance)			
	INJURY/ILLNESS: <input type="checkbox"/> INJURY <input type="checkbox"/> ILLNESS (Please complete Sections A, B, C, and F of this form as appropriate. If property damage is connected to injury, then complete Sections D, or E as necessary to show connection.)			
	PROPERTY DAMAGE ONLY (\$500 - \$99,999.): <input type="checkbox"/> FACILITY <input type="checkbox"/> EQUIPMENT <input type="checkbox"/> VEHICLE <input type="checkbox"/> PROPERTY (Please complete Sections A, B, D, E, and F as appropriate.)			
	SERIOUS MISHAP: <input type="checkbox"/> FATALITY <input type="checkbox"/> HOSPITALIZATION OF ≥ 3 EMPLOYEES <input type="checkbox"/> PROPERTY DAMAGE ≥ \$100,000 (Please complete Sections A, B, C, D, E, and F of this form as appropriate; If property damage only, omit Section C.)			
	INCIDENT: <input type="checkbox"/> NEAR MISS: (e.g. conveyor emergency stop fails, causing bags to pile up and fall, narrowly causing injury) (Please complete all Sections as appropriate.) <input type="checkbox"/> UNEXPECTED EVENT: (e.g. as part of routine system operational checks, conveyor emergency stop fails to shut down system) <input type="checkbox"/> OTHER: (please describe)			
	EMPLOYEE REPORT OF UNSAFE OR UNHEALTHFUL WORKING CONDITION: <input type="checkbox"/> ORAL REPORT <input type="checkbox"/> WRITTEN REPORT (Please complete all Sections as appropriate.) (TSA FORM 2400 - please attach)			
	SEE ADDITIONAL INSTRUCTIONS ON LAST PAGE			
7. EVENT OCCURRED IN TSA-OWNED OR CONTROLLED SPACE: <input type="checkbox"/> YES <input type="checkbox"/> NO				
8. SPECIFIC LOCATION OF EVENT: (e.g., Concourse B Checkpoint, Lane 3)				
9. EVENT REPORTED BY (first, middle initial, last):				
Sect. B. E M P L O Y E E	Please read the Confidentiality Requirements and Privacy Act Statement on Page 4 of this Form. (If more than one employee was involved in the same event, please provide additional employee information on another sheet.)			
	10. CHECK HERE IF EMPLOYEE REPORTED AN UNSAFE OR UNHEALTHFUL WORKING CONDITION AND NAME IS WITHHELD AT EMPLOYEE'S REQUEST: <input type="checkbox"/>			
	11. NAME OF EMPLOYEE (first, middle initial, last):		12. SOCIAL SECURITY NUMBER:	
	13. STREET:			
	14. CITY, STATE, ZIP:			
	15. DATE OF BIRTH (mm/dd/yy):			
	16. OCCUPATION/JOB TITLE:			
	17. DATE OF HIRE (mm/dd/yy):			
	18. SEX: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE			

Sect. C. O S H A D A T A	19. IS THE FATALITY, INJURY, OR ILLNESS OSHA-RECORDABLE? <input type="checkbox"/> YES <input type="checkbox"/> NO (If no, proceed to Section F) If Yes, note entry number on OSHA 300 Log:		
	20. TIME EMPLOYEE BEGAN WORK ON DATE OF INJURY, ILLNESS OR FATALITY: <input type="checkbox"/> AM <input type="checkbox"/> PM		21. TIME OF EVENT: <input type="checkbox"/> AM <input type="checkbox"/> PM Check here if time cannot be determined: <input type="checkbox"/>
	22. NAME OF PHYSICIAN OR OTHER HEALTH CARE PROFESSIONAL WHO TREATED EMPLOYEE: (please print clearly)		
	23. WAS EMPLOYEE TREATED AWAY FROM THE WORKSITE? <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, provide following information) Facility Name: Street: City: State: ZIP:		
	24. WAS EMPLOYEE TREATED IN AN EMERGENCY ROOM? <input type="checkbox"/> YES <input type="checkbox"/> NO		25. WAS EMPLOYEE HOSPITALIZED OVERNIGHT AS AN IN-PATIENT? <input type="checkbox"/> YES <input type="checkbox"/> NO
	26. IF SERIOUS MISHAP, INDICATE THE ORGANIZATIONS THAT WERE CONTACTED AS REQUIRED BY TSA MD 2400.5: <input type="checkbox"/> LOCAL OSHA <input type="checkbox"/> TSOC <input type="checkbox"/> TSA HQ (OSHE) <input type="checkbox"/> OTHER (Indicate)		
Sect. D. P R O P E R T Y D A M A G E	27. FIRE/SMOKE: <input type="checkbox"/> FACILITY <input type="checkbox"/> VEHICLE <input type="checkbox"/> EQUIPMENT <input type="checkbox"/> OTHER		
	28. ELECTRICAL: <input type="checkbox"/> WIRING <input type="checkbox"/> OVERLOAD <input type="checkbox"/> INSULATION <input type="checkbox"/> GROUNDING <input type="checkbox"/> EQUIPMENT CONTACT <input type="checkbox"/> OTHER:		
	29. CHEMICAL RELEASE: <input type="checkbox"/> SPILL <input type="checkbox"/> OTHER (Indicate)		
	30. EXPLOSION: <input type="checkbox"/> CHEMICAL <input type="checkbox"/> HIGH EXPLOSIVES <input type="checkbox"/> OTHER (Indicate)		
	31. MECHANICAL: <input type="checkbox"/> CONVEYOR <input type="checkbox"/> PRESSURE <input type="checkbox"/> FALLS <input type="checkbox"/> MECHANICAL BREAKDOWN <input type="checkbox"/> OVERLOAD <input type="checkbox"/> OTHER (Indicate)		
Sect. E. V E H I C L E	32. LIGHT HIGHWAY: <input type="checkbox"/> AUTOMOBILE <input type="checkbox"/> VAN <input type="checkbox"/> MOTORCYCLE <input type="checkbox"/> PICKUP TRUCK/SUV		
	33. HEAVY HIGHWAY: <input type="checkbox"/> BUS <input type="checkbox"/> DUMP TRUCK <input type="checkbox"/> DELIVERY TRUCK <input type="checkbox"/> SEMITRAILER/TRACTOR TRAILER		
	34. OTHER (Please describe): 		
	35. WAS VEHICLE EQUIPPED WITH SAFETY BELTS? <input type="checkbox"/> YES <input type="checkbox"/> NO		36. IF "YES," WAS SAFETY BELT IN USE: <input type="checkbox"/> YES <input type="checkbox"/> NO
	37. DID VEHICLE MISHAP CONTRIBUTE TO AN OSHA-RECORDABLE INJURY? <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, please attach copy of SF 91, Motor Vehicle Accident Report)		
	38. TSA PROPERTY/VEHICLE COST: \$	39. NON-TSA PROPERTY/VEHICLE COST: \$	40. TOTAL DAMAGE COST: \$

Instructions for Completing TSA Form 2401

When is this form to be used?

This form is to be used when:

1. Investigating, in accordance with TSA MD 2400.4, a report given orally or in writing by an employee of an unsafe or unhealthful working condition.
2. Investigating, in accordance with TSA MD 2400.5, a mishap resulting in an injury, illness, or property damage; or an incident that, if not investigated, could lead to a mishap.
3. Preparing, in accordance with TSA MD 2400.5 Section 6.B.(3)(d), an "initial written notification" in the event of a serious mishap: a fatality, in-patient hospitalization of 3 or more employees for more than observation, or property damage valued in excess of \$100,000.

Who must complete the form?

The supervisor or manager of the employee reporting an unsafe or unhealthful working condition, or an employee experiencing an injury or illness, or who oversees the operation where property damage or an incident occurred, is responsible for ensuring that this form is completed properly, in accordance with the appropriate Directive listed above. The supervisor/manager is encouraged to seek the assistance of the local Safety Action Team or a technically qualified occupational safety and health staff person.

Limited specific guidance is provided below. For more information, please visit the TSA Occupational Safety and Health website on TSA's Intranet (http://tsaweb.tsa.dot.gov/tsaweb/intraapp/editorial/editorial_0781.xml), or contact Donna Kistoo, OSHE Office Administrator, at (571) 227-2291 for assistance.

<i>Section</i>	<i>Block</i>	<i>Topic</i>	<i>Clarification</i>
A	4	Case Number	Case numbers will begin with "001" at the beginning of each calendar year and will be numbered consecutively throughout the year. The office location or routing number will indicate where the event occurred. For example, TSA-17- 001-03; or TSA-BWI-001-03.
A	6	Nature of EVENT	Check only one box, representing the most serious event. For example, an injury is more serious than property damage, though the latter may have contributed to the injury. A fatality is more serious than the injury that may have preceded it. If an employee dies after the form was completed for an injury, then the form should be updated and the "yes" checkbox checked in block # 3.
B	10	Request to Withhold Name	If an employee checks the checkbox requesting that his/her name be withheld, it is important to ensure that this person's name is not divulged beyond those individuals specifically responsible for investigating the alleged hazard, such as the immediate supervisor and a technically qualified safety and health person. If copies are made of this form, the name must be rendered illegible.
C	11	OSHA Recordable	OSHA requires that work-related injuries and illnesses that result in the following be recorded on the OSHA 300 Log (29 CFR Part 1904): (1) death; (2) days away from work beyond the date of injury; (3) restricted work activity or job transfer; (4) loss of consciousness; (5) medical treatment beyond first aid; (6) a significant injury or illness diagnosed by a physician or other licensed health provider. If in doubt, contact a safety professional/collateral duty safety and health person, or review information on OSHA's recordkeeping site at www.osha.gov/recordkeeping .

Confidentiality Requirements

THIS FORM CONTAINS INFORMATION RELATING TO EMPLOYEE HEALTH AND MUST BE USED IN A MANNER THAT PROTECTS THE CONFIDENTIALITY OF EMPLOYEES TO THE MAXIMUM EXTENT POSSIBLE WHILE THE INFORMATION IS BEING USED FOR OCCUPATIONAL SAFETY AND HEALTH PURPOSES. THIS FORM SHOULD BE MAINTAINED IN A SECURED OFFICE OR FILE TO PREVENT UNWARRANTED RELEASE OF EMPLOYEES' PERSONAL INFORMATION (FOR EXAMPLE, NAME, ADDRESS, SOCIAL SECURITY NUMBER, AND MEDICAL INFORMATION) THAT IS PROTECTED BY OSHA AND PRIVACY ACT REGULATIONS. TSA SUPERVISORS, MANAGERS, AND OCCUPATIONAL SAFETY AND HEALTH STAFF MUST FAMILIARIZE THEMSELVES WITH "PRIVACY CONCERN CASE" REQUIREMENTS IN 29 CFR 1904.29 BEFORE COMPLETING PART 1904 FORMS OR THIS FORM. SINCE THIS FORM INCORPORATES ALL DATA ELEMENTS IN OSHA FORM 301, INJURY AND ILLNESS INCIDENT REPORT, THE SAME "PRIVACY CONCERN CASE" RESTRICTIONS APPLY. EMPLOYEES MAY REQUEST ACCESS TO THEIR OWN RECORDS IN ACCORDANCE WITH 29 CFR 1904.35. GOVERNMENT REPRESENTATIVES MAY REQUEST PART 1904 RECORDS IN ACCORDANCE WITH 29 CFR 1904.40 AND TSA MD 2400.5.

Privacy Act Statement

AUTHORITY: 5 U.S.C. 301, 29 CFR PART 1904, E.O. 9397, 12196. **PRINCIPAL PURPOSE(S):** TO REPORT, TRACK, AND STUDY WORK-RELATED INJURIES, ILLNESSES, AND MISHAPS. **ROUTINE USE(S):** THE INFORMATION YOU PROVIDE MAY BE SHARED WITH OTHER GOVERNMENT AGENCIES, TRANSPORTATION FACILITIES, OR OTHER PERSONS WHERE APPROPRIATE. **DISCLOSURE:** MANDATORY; FAILURE TO PROVIDE THE REQUESTED INFORMATION MAY PREVENT PROCESSING OF ANY ASSOCIATED CLAIMS.