

# THE SYNERGIST

MAY 2002

volume 13 number 5

Serving Occupational and Environmental  
Health and Safety Professionals

## BEYOND FIRST AID: RECOGNIZING THE NEW MEDICAL TREATMENT RECORDING CRITERIA

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One of the key provisions of OSHA's new recordkeeping rule (29 CFR 1904) is the revised definition of first aid. Understanding what constitutes first aid is critical because "any medical treatment that goes beyond first aid meets the general recording criteria and is thus recordable." The following information highlights OSHA recording criteria pertaining to medical treatment.

Prior to the new rule, occupational health physicians working on behalf of employers could help companies avoid OSHA recordables by prescribing over-the-counter medications at prescription strength doses to injured or ill employees. However, the new recordkeeping standard now prohibits this treatment option. The new rule revises the definition of first aid, stating, "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."

Although this rule has narrowed the standard of first aid, occupational health physicians who have expertise in incident management can use their medical expertise to look at the full range of treatment options. Their goal is to provide workers with appropriate, effective care while never losing sight of how their medical decisions affect employers.

The new recordkeeping standard provides a finite list of first aid treatments. For EHS professionals and physicians alike, knowledge of this rule will ensure a clear understanding of what is considered an OSHA recordable medical treatment.

For the purposes of Part 1904, "first aid" means 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

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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, backboards, 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 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 is considered medical treatment for recordkeeping purposes); or (N) drinking fluids for relief of heat stress. (Source: *Federal Register*, vol. 66, no. 13. Jan. 19, 2001, p. 6128.)

Greaney is an occupational health physician and president of Workcare, Orange, Calif. His recent Speak Out article (The Synergist, January 2002, p. 38) discusses incident management and recordkeeping; this article updates certain information in his Speak Out regarding first aid and recordkeeping.