



# **FRA Guide for Preparing Accident/Incident Reports**

**U.S. Department of Transportation  
Federal Railroad Administration**

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**Office of Safety**

**PROPOSED**

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DOT/FRA/RRS-22

MAIL MONTHLY ACCIDENT/INCIDENT REPORTING SUBMISSIONS TO:

Federal Railroad Administration  
FRA Project Office/CITI  
4601 North Fairfax Drive, Suite 1100  
Arlington, VA 22203-1547

Please refer to <http://safetydata.fra.dot.gov/OfficeofSafety>, and click on “Changes in Railroad Accident/Incident Recordkeeping and Reporting Info” for updated information.

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## Preface

The Federal Railroad Administration's (FRA) regulations on reporting railroad accidents/incidents are found primarily in Title 49 of the Code of Federal Regulations (CFR), Part 225.<sup>1</sup> The purpose of the regulations in Part 225 is to provide FRA with accurate information concerning the hazards and risks that exist on the Nation's railroads. See § 225.1. FRA needs this information to effectively carry out its regulatory and enforcement responsibilities under the Federal railroad safety statutes.<sup>2</sup> FRA also uses this information for determining comparative trends of railroad safety and to develop hazard elimination and risk reduction programs that focus on preventing railroad injuries and accidents. Issuance of these regulations preempts States from prescribing accident/incident reporting requirements. Any State may, however, require railroads to submit to it copies of reports filed with FRA under Part 225 for accidents/incidents that occur in that State.

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<sup>1</sup> For brevity, further references in the Guide to sections in 49 CFR Part 225 will omit "49 CFR" and include only the section, e.g., § 225.9.

<sup>2</sup> Title 49 United States Code Chapters 51, 201-213.



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### Executive Summary

In 1910 Congress enacted the Accident Reports Act, Public Law No. 165, recodified at 49 U.S.C. §§ 20901 - 20903, as amended. The Accident Reports Act, as amended, requires in part, that railroad carriers file with the Secretary of Transportation reports on “*all accidents and incidents resulting in injury or death to an individual or damage to equipment or a roadbed arising from the carrier’s operations during the month.*” (Emphasis added). The Secretary of Transportation subsequently delegated the authority to carry out the Accident Reports Act to FRA. 49 USC 103(c)(1); 49 CFR(c)(11). The accident/incident reporting regulations at 49 CFR Part 225 were originally issued pursuant to the Accident Reports Act of 1910.

Sixty years later, Congress enacted the Federal Railroad Safety Act of 1970. Public Law No. 91-458, recodified primarily at 49 U.S.C. chapter 201, with penalty provisions in 49 U.S.C. chapter 213, as amended. FRA’s accident/incident reporting requirements, 49 CFR Part 225, are currently issued under the dual statutory authority of the Accident Reports Act of 1910 and the Federal Railroad Safety Act of 1970.

On December 29, 1970, Congress enacted the Occupational Safety and Health Act (OSH Act). While the OSH Act gives the Secretary of Labor a broad, general authority to regulate working conditions that affect the occupational safety and health of employees, it also recognized the existence of similar authority in other Federal agencies. Section 4(b)(1) of the OSH Act provides that the OSH Act shall not apply to working conditions to which another Federal agency exercises statutory authority to prescribe or enforce standards or regulations affecting occupational safety or health. The OSH Act also requires that the Secretary of Labor issue rules to develop and maintain an effective program of collection, compilation, and analysis of occupational safety and health statistics. This data is compiled in a national database by DOL and used to chart the magnitude and nature of occupational injury and illness problems across the country.

Because FRA exercises statutory authority to prescribe and enforce standards and regulations for all areas of railroad safety under the Federal Railroad Safety Act of 1970, the Occupational Safety and Health Administration's (OSHA’s) jurisdiction may be preempted by FRA under section 4(b)(1) of the OSH Act with regards to certain matters related to railroad safety. See Policy Statement asserting FRA jurisdiction over matters involving the safety of railroad operations, 43 FR 10584, (March 14, 1978). With respect to employee injury and illness recordkeeping, however, the Occupational Safety and Health Review Commission ruled that employee injury and illness recordkeeping does not come within the purview of section 4(b)(1) of the OSH Act and, therefore, OSHA’s jurisdiction has not been displaced by FRA’s recordkeeping regulations. *Secretary of Labor v. Conrail* (OSHRC Docket No. 80-3495, 1982). Consequently, a railroad over which FRA exercises jurisdiction, must comply with the employee injury and illness recordkeeping requirements promulgated by both FRA and OSHA.

Nevertheless, because FRA’s employee injury and illness recordkeeping/reporting requirements employ equivalent standards to those promulgated by OSHA, OSHA does not require railroad

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carriers to maintain OSHA records in addition to FRA records. Rather, railroad carriers are only required to record/report employee injuries and illnesses to FRA in accordance with FRA's regulations. See 29 CFR 1904.3.

Consequently, FRA's accident/incident reporting regulations that concern railroad occupational casualties should be maintained, to the extent practicable, in general conformity with OSHA's recordkeeping and reporting regulations to permit comparability of data on occupational casualties between various industries, to allow integration of railroad industry data into national statistical databases, and to improve the quality of data available for analysis of casualties in railroad accidents/incidents. FRA makes all employee injury and illness data available to OSHA for use in its complementary program of regulation and provides the data to the Bureau of Labor Statistics each year.

In order to have a database that allows accurate comparison between industries, the rules that FRA uses must be modified whenever OSHA makes significant changes that affect the number and types of work-related deaths, injuries, and illnesses for which records are to be maintained, and the manner in which these are to be classified. Such a change occurred for the first time since OSHA's original reporting requirements were implemented in 1971, on January 1, 2002, when revised OSHA recordkeeping requirements became effective. In response, FRA amended its own accident/incident reporting rules, effective May 1, 2003, to conform with OSHA's amended rules, in addition to making other miscellaneous amendments.

FRA now finds it necessary to make appropriate changes to its regulations in response to issues identified by FRA in its administration of the current accident/incident recordkeeping and reporting program. Specifically, FRA is amending its accident/incident reporting regulations in order to:

- Better conform certain of the regulation's definitions to those set forth in 49 U.S.C. 20102, as amended;
- Require the reporting of suicide data;
- Include a comprehensive list of accident/incident reporting exceptions;
- Allow for consolidated accident/incident reporting by integrated railroad systems;
- Add necessary definitions
- Set system standards for the electronic retention of accident/incident reporting records by railroads;
- Clarify ambiguous definitions and regulations;
- Update regulatory text, as applicable;
- Enhance the quality of information available for railroad casualty analysis;
- Limit which highway-rail grade crossing fatalities must be telephonically reported to the National Response Center;

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- Clarify and refine the requirements and criteria for using and retaining Form FRA F 6180.107, “Alternative Record for Illnesses Claimed to be Work Related,” and the alternative railroad-designed record;
- Eliminate the oath and notarization requirements on Form FRA F 6180.55, “Railroad Injury and Illness Summary”;
- Allow for the electronic submission of Form FRA F 6180.55, “Railroad Injury and Illness Summary”. Allow for submission of Form FRA F 6180.55 and Form FRA F 6180.81 in .pdf or .jpg format;
- Set forth record retention requirements for certain accident/incident recordkeeping and reporting records not previously addressed;
- Set forth requirements for electronic accident/incident recordkeeping systems;
- Update FRA’s address information; and
- Require railroads to try to obtain documentation regarding: cause of death, or nature and severity of highway-rail grade crossing injuries.

In addition to amending its regulations, FRA is revising the FRA Guide for Preparing Accident/Incident Reports and certain accident/incident recordkeeping and reporting forms.

Please refer to <http://safetydata.fra.dot.gov/OfficeofSafety> and click on “Changes in Railroad Accident/Incident Recordkeeping and Reporting Info” for updated information regarding changes.

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### **1. Overview of Railroad Accident/Incident Recordkeeping and Reporting Requirements and Miscellaneous Provisions and Information**

#### **1.1 General**

This chapter provides an overview of FRA’s accident/incident recordkeeping and reporting requirements.

##### ***1.1.1 Purpose of the FRA Guide for Preparing Accident/Incident Reports***

The FRA Guide for Preparing Accident/Incident Reports (FRA Guide) provides instructions and guidance associated with FRA’s accident/incident recordkeeping and reporting requirements. The FRA Guide is a supplement to Part 225 and is not a replacement for the regulatory text. Federal railroad safety regulations at 49 CFR § 225.11 require that each railroad subject to Part 225 complete reports of accidents/incidents in accordance with the current FRA Guide.

##### ***1.1.2 Applicability***

To determine if Part 225 applies to a railroad, in whole or in part, see § 225.3, “Applicability.” See also “Extent and Exercise of FRA’s Safety Jurisdiction,” 49 CFR Part 209 Appendix A, and “Statement of Agency Policy Concerning Waivers Related to Shared Use Trackage or Rights-of-Way by Light Rail and Conventional Operations,” 49 CFR Part 211, Appendix A.

##### ***1.1.3 Consolidated Reporting***

Under certain circumstances, a parent corporation that dominates its subsidiary railroads, which operate as a single, seamless, integrated U.S. rail system, may be considered by FRA as a single railroad for purposes of Part 225. See § 225.6.

### **1.2 Major Recordkeeping and Reporting Requirements Under Part 225**

There are many recordkeeping and reporting requirements arising from Part 225. The following is a summarized listing of FRA’s major recordkeeping and reporting requirements for all railroads subject to Part 225. This listing is a summary only and does not replace the regulatory text or requirements set forth in the Code of Federal Regulations. Narratives are included when supplemental information, requirements or guidance is warranted.

#### ***1.2.1 Telephonic Reporting***

Railroads must make immediate telephonic notification of certain accidents/incidents. See § 225.9, and for supplemental information, see Appendix M.

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*Additional Telephonic Reporting Requirements Related to Accidents.* There are four additional sections in chapter II, Subtitle B of Title 49 CFR that require telephonic reporting related to accidents. These sections are listed below for informational purposes.

**49 CFR 229.17** - *Railroad Locomotive Safety Standards; Accident reports.* Under this section, in the case of an accident due to a failure from any cause of a locomotive or any part or appurtenance of a locomotive, or a person coming in contact with an electrically energized part or appurtenance, which results in serious injury (i.e., an injury that results in the amputation of any appendage, the loss of sight in an eye, bone fracture, or confinement in a hospital for a period of more than 24 consecutive hours) or death of one or more persons, the railroad operating the locomotive must immediately report the accident by toll-free telephone number: (800) 424-0201.

**49 CFR 233.5** - *Signal Systems Reporting Requirements; Accidents resulting from signal failure.* Under this section, a railroad must report within 24 hours to FRA by toll-free telephone number: (800) 424-0201, whenever it learns of the occurrence of an accident/incident arising from the failure of an appliance, device, method, or system to function or indicate as required by 49 CFR Part 236 that results in a more favorable aspect than intended or other condition hazardous to the movement of a train.

**49 CFR 234.7** - *Grade Crossing Signal System Safety; Accidents involving grade crossing signal failure.* Under this section, a railroad must report to FRA every impact between on-track railroad equipment and an automobile, bus, truck, motorcycle, bicycle, farm vehicle, or pedestrian at a highway-rail grade crossing involving an activation failure. Notification shall be provided to the National Response Center within 24 hours of occurrence at: (800) 424-0201.

**49 CFR 219.209(a)** - *Control of Alcohol and Drug Use; Reports of tests and refusals.* Under this section, a railroad that has experienced a qualifying accident/incident or other event for which specimens were obtained must provide immediate telephonic notification summarizing such events to the National Response Center at: (800) 424-8802 and to FRA's Office of Safety at: (202) 493-6313.

### **1.2.2 Annual Reports to FRA**

Railroads must submit to FRA an annual report of employee hours worked by state on Form FRA F 6180.56. The report must be included with the railroad's monthly submission for December. See § 225.21(d).

### **1.2.3 Monthly Reports to FRA**

Railroads must submit to FRA monthly reports of all reportable accidents/incidents. See § 225.11. The railroad's report must be submitted within 30 days following the month to which it applies. The report shall be made on the forms prescribed in § 225.21 in hardcopy or by means

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of optical media or electronic submission via the Internet in accordance with §225.37 approved by FRA.

The Form FRA F 6180.55 (Railroad Injury and Illness Summary) must be submitted each month, even if there were no reportable accidents/incidents during the month. Corresponding forms FRA F 6180.55a, FRA F 6180.54, FRA F 6180.81, and FRA F 6180.57 must also be completed and submitted for reportable accidents/incidents occurring during the report month.

Monthly reports of accidents/incidents (which are being submitted as hard copies) and related correspondence, and optical media are to be addressed to:

Federal Railroad Administration  
FRA Project Office/CITI  
4601 North Fairfax Drive, Suite 1100  
Arlington, VA 22203-1547

Please refer to <http://safetydata.fra.dot.gov/OfficeofSafety> and click on “Changes in Railroad Accident/Incident Recordkeeping and Reporting Info” for updated information.

*Primary Groups of Reportable Accidents/Incidents.* Reportable Accidents/incidents are divided into three major groups for reporting purposes. See §225.19. These groups correspond to different FRA forms and are as follows:

1. Death, injury or occupational illness (Form FRA F 6180.55a)
2. Rail equipment accident/incident (Form FRA F 6180.54)

Note: Accident reports citing an employee human factor as a cause must be accompanied by an Employee Human Factor Attachment (Form FRA F 6180.81). In addition, each implicated employee must be provided with a Notice to Railroad Employee Involved in Rail Equipment Accident/Incident Attributed to Employee Human Factor (Form FRA F 6180.78).

Note: In preparing a rail equipment accident/incident report, the railroad must inquire into the possible involvement of alcohol/drug use or impairment and report such information to FRA as required by § 225.18.

3. Highway-rail grade crossing accident/incident (Form FRA F 6180.57)

The specific requirements for completing the various types of accident/incident forms are described in the chapters addressing the individual forms. A single form is usually sufficient to report most events; however, there are situations when multiple report forms are necessary. An example is a highway-rail grade crossing collision resulting in reportable injuries. An accident of this type would require the completion of a Form FRA F 6180.55a for each FRA reportable injury sustained, and a Form FRA F 6180.57. In addition, if reportable on-track equipment and track damage in this accident exceeds the current monetary threshold for train accidents, then a Form FRA F 6180.54 must also be prepared.

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Reports are to be arranged in the following order:

1. Form FRA F 6180.55
2. Form FRA F 6180.55a
3. Form FRA F 6180.54 (Attach Form FRA F 6180.81 when applicable)
4. Form FRA F 6180.57
5. Form FRA F 6180.56 (December report only)

### ***1.2.4 Late, Amended and Updated Reports***

*Late Reports.* When a railroad finds that an accident/incident was omitted from a previous month's submission, a completed report and a letter explaining the reason for the late filing are to be sent to FRA. The late report and letter are to be forwarded no later than the next monthly filing. See § 225.13.

Late reports are not to be attached to, nor included in counts of, reports prepared for the current month. Any late report is to be filed for the year and month in which the original event occurred. Take, for example, the following scenario: An employee sustains a minor injury in June, but none of the reporting criteria are satisfied. He/she is re-examined in July because of complications and is instructed to take prescription medication and remain off work for 3 days. In this instance, a late report for the month of June must be prepared.

*Amended Reports.* When a railroad discovers that an accident/incident has been improperly reported on a previous month's submission, then an amended report must be submitted to FRA with a letter of explanation. The amended report and letter are to be forwarded no later than the next monthly filing. See § 225.13. The report should have the notation "Amended Report" at the top of the form, and items being changed are to be circled in red.

When a railroad discovers that a report has been erroneously submitted for a non-reportable event, a copy of the report is to be submitted with the notation "DELETE – Non-reportable" in red. Those who submit reports electronically using Accident/Incident Report Generator (AIRG) software provided by FRA must print out a copy of the report that is to be deleted as non-reportable, and note in red "DELETE – Non-reportable," and submit this copy to FRA.

*Close of the Calendar Year.* FRA publishes final accident/incident counts following the conclusion of a reporting year. Submission of the December report concludes the reporting year. However, railroads are still required to provide to FRA late reports of unreported accidents/incidents and amended reports that correct or update earlier submissions.

FRA will receive and process any and all late and amended reports for a period of five years following the calendar year to which an amended or late report relates. This accommodation does not relieve a railroad of its obligation to promptly file a late or amended report upon becoming aware of an omission, mistake or otherwise, in accordance with § 225.13 and the late

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and amended reporting guidance set forth in this Guide. FRA will continue to publish its Annual Report of Railroad Safety Statistics. Because the accident/incident databases will remain open for updating for a period of five years, the statistics published in the Annual Report will be subject to change. The authoritative source for rail safety statistics will now be the Office of Safety's web site: <http://safetydata.fra.dot.gov/OfficeofSafety>.

To clarify:

(1) Railroads must file amended reports with FRA (unless otherwise sepecified in paragraph (3) below) through December 1 of the year following the year in which the accident/incident was initially reported.

(2) Railroads must file late reports with FRA for five years (following the end of the calendar year to which the accident/incident relates) for all unreported accident/incidents.

(3) Railroads must file amended reports for five years after the end of the calendar year to which they relate for the following changes:

a) Railroad Injury and Illness Summary (Continuation Sheet) (Form FRA F 6180.55a): Change from Injury to Fatality (only if the injured person dies within 180 days from the date of the injury);

b) Highway-Rail Grade Crossing Accident/Incident Report (Form FRA F 6180.57): Change from Injury to Fatality, change in Grade Crossing ID, change in the Rail Equipment Involved;

c) Rail Equipment Accident/Incident Report (Form FRA F 6180.54): Change from Injury to Fatality, change in Grade Crossing ID, Rail Equipment Involved, Primary Cause Code, Contributing Cause Code, Type of Territory, Number of Cars Releasing Hazardous Material or Evacuation.

d) Railroad Injury and Illness Summary (Continuation Sheet) (Form FRA F 6180.55a): A significant change in the number of reportable days away from work or days restricted; a significant change is at least a 10% variance in the number of actual reportable days away from work or days restricted compared to the number of days already reported.

e) Railroad Equipment Accident/Incident Report (Form FRA F 6180.54): A significant change in the damage costs for reportable rail equipment accidents/incidents; a significant change is a 10% variance between the damage amount reported to FRA and the current cost figures.

*Computer Submission of Reports.* In order to assist railroads in maintaining and submitting records and reports required by this rule, FRA developed the AIRG software package for personal computers that have Microsoft Windows-based operating systems. See 61 Fed. Reg. 59485 (Nov. 22, 1996). FRA will provide copies of this software free of charge upon request by the reporting officer. You can find information on how to obtain AIRG by referring to <http://safetydata.fra.dot.gov/OfficeofSafety> and clicking on "Changes in Railroad Accident/Incident Recordkeeping and Reporting Info." See the Forms/Publications tab and click on "Changes in Railroad Accident/Incident Recordkeeping and Reporting Info.", Answer 5, or



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click on FRA Forms and choose AIRG - Accident Incident Report Generator Request Form, then download and print. See Appendix K.

### ***1.2.5 Recordkeeping***

#### *Form FRA F 6180.98 or the Alternative Railroad-Designed Record of Each Accountable and Each Employee Reportable Injury/Illness*

Railroads must maintain a record (Form FRA F 6180.98 or the alternative railroad-designed record) of each accountable and each employee reportable injury/illness. See § 225.25(a) and (b). Each railroad shall enter each reportable and accountable injury/illness on the appropriate record as early as practicable, but no later than 7 working days after receiving information or acquiring knowledge that an employee injury or illness has occurred. See § 225.25(f).

Note that for certain claimed occupational illness cases only, railroads may maintain an alternate record (Form FRA F 6180.107 or the alternative railroad-designed record). See § 225.25(i) and (j).

#### *Make Available to Employees Copies of Forms or Records of Employee Injury or Illness.*

Railroads must make available to an employee, upon request, a copy the completed Railroad Employee Injury and/or Illness Record (Form FRA F 6180.98) or the alternative railroad-designed record, as well as a copy of forms or reports required to be maintained or filed under Part 225 pertaining to the employee's own work-related injury or illness. See § 225.25(c).

#### *Form FRA F 6180.97 or the Alternative Railroad-Designed Record of Each On-Track Accident/Incident*

Railroads must maintain a record (Form FRA F 6180.97 or the alternative railroad designed record) of each accountable and each reportable on-track accident/incident. See § 225.25(d) and (e). The railroad shall enter each reportable and accountable rail equipment accident/incident on the appropriate record as early as practicable, but no later than 7 working days after receiving information or acquiring knowledge that a rail equipment accident/incident has occurred. See §225.25(f).

### ***1.2.6 Access to Records***

*Access to Records and Reports.* Railroads must provide to FRA access to records and reports upon request within specified time limits. See §§ 225.25(g) and 225.35.

### ***1.2.7 Posting of Injuries and Illnesses***

*Post Listing of All Injuries and Occupational Illnesses Reported to FRA.* Railroads must post a listing of all injuries and occupational illnesses reported to FRA as having occurred to employees of an establishment, in a conspicuous location at that establishment, within 30 days after the expiration of the month during which the injuries and illnesses occurred. Each monthly posting shall remain continuously displayed for the next 12 consecutive months. See § 225.25(h).

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If there are no reportable injuries or occupational illnesses associated with an establishment for that month, the posting must make reference to that fact.

A railroad is permitted to not post information on an injury or illness only if the employee who incurred the injury or illness makes a request in writing to the railroad's reporting officer that his or her particular injury or illness not be posted, or if an occupational injury or illness is a privacy concern case. See § 225.25(h)(15). See also § 225.5 for definition of "privacy concern case."

### ***1.2.8 Record Retention***

*Retain Accident/Incident Records and Duplicates of Reports for Specified Periods of Time.*

Railroads must retain accident/incident records and duplicates of reports for specified periods of time. See § 225.27(a)-(c). Electronic recordkeeping systems must conform to FRA's standards. See § 225.27(d).

### ***1.2.9 Internal Control Plan***

*Adopt and Comply with an Internal Control Plan (ICP).* Railroads must adopt and comply with an internal control plan. See §225.33.

FRA believes that an ICP as prescribed by § 225.33 best provides the procedures necessary to ensure that complete, reliable, and accurate data is obtained, maintained, and disclosed by the railroads. See Appendix I of this Guide for model ICPs. FRA investigations have repeatedly found instances in which departments within an individual railroad failed to provide to the railroad reporting officer information critical to determining reportability or information necessary for filing an accurate and complete report.

The ICP is a performance standard that ensures the accuracy of a process and, in this case, the process is accident/incident reporting. The ICP dictates the necessity for communication within each railroad to ensure that proper reporting will be accomplished. The ICP may vary in size, from one that is a few pages for smaller railroads and shortlines to one of considerable size for the major carriers.

The ICP challenges the railroads to develop a Total Quality Management (TQM) system to ensure that there are no errors in reporting. "No errors" means that all reportable accidents and incidents are reported to FRA and that each report is accurately completed prior to submission to FRA; in other words, a "zero tolerance" policy with respect to inaccurate reporting. TQM focuses on continuous and incremental improvements of process performance.

The ICP addresses intimidation and harassment of any person calculated to prevent or discourage such person from either receiving proper medical treatment for an injury/illness or from reporting an accident, incident, illness, or injury. FRA is aware that many railroad employees fail to disclose their injuries to the railroad or fail to accept reportable treatment from a physician because they wish to avoid potential harassment from management or possible discipline that is sometimes associated with the reporting of such injuries. FRA is also aware that in some instances, supervisory personnel and mid-level managers are urged to engage in practices that

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may undermine or circumvent the reporting of injuries and illnesses. Railroads must remain proactive in accurate reporting of all reportable accidents, injuries, and illnesses and must not engage in practices that could manipulate reportability of these incidents. In some instances, railroads report an injury or illness to FRA only after FRA inspectors make management aware that a particular injury or illness was not reported. Many times, FRA inspectors conduct an investigation pursuant to a complaint from an employee alleging that his or her injury/illness was not properly reported or was not reported at all. Again, the railroad usually reports this injury/illness to FRA only after FRA informs management of the situation. Each railroad shall adopt and comply with a written ICP that shall be maintained at the office where the railroad's reporting officer conducts his or her official business. Each railroad shall amend its ICP, as necessary, to reflect any significant changes to the railroad's internal reporting procedures. The ICP shall be designed to maintain absolute accuracy and shall include, at a minimum, each of the 11 components set forth in § 225.33(a)(1-11).

### **1.3 Miscellaneous Provisions and Information**

#### ***1.3.1 Assistance and Guidance***

In deciding on the reportability of an accident/incident or otherwise fulfilling the reporting obligation, assistance may be obtained by contacting any of the regional offices or FRA Headquarters as listed in Appendix G.

#### ***1.3.2 Copies of the Regulations***

Copies of Federal regulations may be obtained by contacting the Superintendent of Documents, Government Printing Office, Washington, DC 20402-9328 (telephone: 202-512-1803; <http://www.gpo.gov>).

#### ***1.3.3 Reporting Decisions***

Ordinarily, the reporting officer will decide whether an accident/incident is reportable. This decision cannot be an arbitrary one, but must be based on a thorough review of all evidence, as opposed to speculation, related to the accident/incident in question and must be in accordance with the requirements of the accident reports statute (49 U.S.C. §§ 20901-20903), Part 225, and the guidelines provided in this Guide. If you are certain that a particular situation is outside the scope of the reporting requirements, then the basis on which this determination was made must be thoroughly documented before the case may be omitted from the monthly submission.

Neither the fact that there were no witnesses to an accident/incident nor the refusal of the railroad to accept responsibility for an event is grounds for failing to report. A report must be made whenever there is credible information that a reportable situation may have occurred. Later, if it is determined that the event was not reportable, a request to delete it from FRA's files is to be made. If there is any uncertainty as to whether or not to report an accident/incident, it is recommended that a report be made. Later, as additional information is developed, or following consultation with FRA Office of Safety Assurance and Compliance personnel, a request may be made to delete the incident from the file. See § 225.17.

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Note that FRA cannot delegate authority to decide matters of judgment when facts are in dispute. In such cases, FRA will make the final decision as to reportability. In arriving at this decision, FRA will review all investigatory material associated with the case, including, but not limited to, the following: the initial report filed by the affected person, witness statements, transcripts of hearings, medical records, time and attendance records, and the purpose of payouts made in connection with the accident/incident.

### ***1.3.4 Claimed But Not Admitted Submissions***

When facts affecting the reportability of a case are in dispute, a report may be filed with FRA as “Claimed But Not Admitted.” An accident/incident reported under this provision is given special examination by the FRA, but must still be recorded on the appropriate form and be included as part of the report package for that month. A copy of all evidence relating to the event and a letter summarizing the reasons why it should be excluded from the file must be provided. FRA will examine all documentation. If the facts are sufficient to support the railroad’s position, the case will not be charged against the railroad; otherwise, it will be added to the file. In either case, FRA will advise the railroad of the agency’s determination. It is suggested that prior to making such a filing that FRA be contacted by telephone (FRA telephone numbers are listed in Appendix G) to discuss the overall merits of the case.

### ***1.3.5 Penalties***

Any person (including a railroad and any manager, supervisor, official, or other employee or agent of a railroad) who violates any requirement of Part 225 or causes the violation of any such requirement is subject to a civil penalty. The person may also be subject to criminal penalties.

FRA may issue these civil penalties pursuant to 49 U.S.C. §§ 21301, 21302, and 21304. Also see Appendix A to Part 209 of the CFR for other sanctions. Criminal penalties and/or imprisonment provided for in 49 U.S.C. § 21311 may also be imposed on any individual who knowingly and willfully makes a false entry in a record or report required by the accident reporting regulations or other regulations issued under 49 U.S.C. Chapter 201; who destroys, mutilates, changes, or falsifies such a record or report; who does not enter required specified facts in a such record or report; who makes or preserves such a record or report in violation of such a regulation or order; or who files a false record or report with FRA. FRA wants to make clear to all railroads that the agency will be diligent in its efforts to ensure that all parties adhere to and comply with the intimidation and harassment policy in the ICP. It should be noted that FRA will be aggressive in pursuing enforcement sanctions against any person found to be in violation of the railroad’s harassment and intimidation policy.

### ***1.3.6 Public Examination and Use of Reports***

Accident reports may be inspected at FRA’s Office of Safety. FRA will provide copies of accident/incident reports under the Freedom of Information Act upon written request. Written

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requests for copies of accident/incident reports should be accompanied by the appropriate fee and addressed to:

Freedom of Information Act Coordinator  
Office of Chief Counsel  
Federal Railroad Administration  
U.S. Department of Transportation  
RCC-10, Mail Stop 10  
West Building 3rd Floor, Room W33-437  
1200 New Jersey Avenue, SE.  
Washington, DC 20590

Each request should be clearly marked “Request for Accident/Incident Report.” See § 225.7.

### 1.4 Questions and Answers

- Q1. We are required to post a listing of all reported injuries and occupational illnesses to employees at that establishment. Although this listing does not contain personal identifiers, e.g., names, Social Security numbers, it may be possible to ascertain the identity of the person, particularly in small establishments, based on the information listed. There may be conditions that are reportable, about which the employee, or the railroad, is especially sensitive regarding the information being displayed in such a fashion. Are there any exceptions to this requirement?**
- A1. Yes. The purpose of this listing is to raise the awareness of employees at the establishment of the hazards that exist in the workplace, and to include the employees in the reporting process. It was not FRA’s intent, nor does it desire, to have conditions that an employee would prefer to keep confidential displayed on this listing. Section 225.25(h)(15) permits a railroad not to post information on an occupational injury or illness case that is a privacy concern case. This includes cases in which the employee independently and voluntarily requests in writing to the railroad reporting officer that his or her injury or illness not be posted. (See § 225.5 for full definition of “privacy concern case.”)
- Q2. In a single large facility, such as a major yard, must a railroad maintain the records and reports required by this regulation at each individual location where the employees of that facility report to work?**
- A2. No. FRA has always exercised a certain amount of flexibility concerning the locations where these records must be kept. FRA does not require that separate records be maintained for the various distinct activities that take place in a large facility. Work locations that are near each other can be treated as a single establishment when they are part of a larger facility at that location. Permanent work sites that are physically distant from each other, e.g., in another city, are

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separate establishments and are covered by the term, “single physical location,” contained in the reporting guide. See §§ 225.25(g), 225.27 and 225.35 for FRA’s requirements related to record maintenance and access.

**Q3. Are there any particular forms that must be used to record injuries, illnesses, accidents and/or incidents?**

- A3. For recording an injury or illness for a railroad employee, either the Railroad Employee Injury and/or Illness Record (Form FRA F 6180.98), or an alternative railroad record can be used. If the alternative record is used, the regulation states that it “shall contain all of the information required on the Railroad Employee Injury and/or Illness Record.” See § 225.25(b).

For initially recording a rail equipment accident/incident, either the Initial Rail Equipment Accident/Incident Record (Form FRA F 6180.97) or an alternative railroad-designed record can be used. If the alternative record is used, the regulation states that it “shall contain all of the information required on the Initial Rail Equipment Accident/Incident Record.” See § 225.25(e).

**Q4. I currently maintain a database of all conditions reported by employees, passengers and others, regardless of severity or consequences. A lot of these injuries require no treatment, or only need first aid. I document every potential case, just in case it later becomes reportable. Does the requirement to record entries involving employees on the Form FRA F 6180.98 or an alternative railroad-designed form make it necessary for me to have two logs, one for “accountable” injuries to employees and a separate record for others? If possible, I would like to consolidate all of my records into a single file.**

- A4. No, the alternative railroad-designed record may be used to record the additional information described. The regulation only requires that you maintain certain information about your employees which FRA inspectors may ask to see in order to verify compliance. For example, the regulation does not require that Form FRA F 6180.98 contain information about contractors or volunteers. You may include records for any class of person in your file, and you may also include additional information beyond that required. To avoid any confusion about those entries that are required by the regulation and additional records you may choose to include in your file, there must be a means of identifying the two categories incorporated in your system design.

These same general guidelines also apply for alternative railroad-designed Initial Rail Equipment Accident/Incident Record, Form FRA F 6180.97, described in Chapter 5.

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**Q5. Does this mean we can maintain this information electronically? If so, what are the requirements for centralized processing of this data?**

A5. Yes. FRA addresses electronic record retention at § 225.37, where FRA sets forth minimum system requirements for the electronic retention of accident/incident records. Note the exception, however, with respect to FRA Form F 6180.55, “Railroad Injury and Illness Summary.” If a railroad submits FRA Form F 6180.55 to FRA electronically, the railroad must maintain a hard copy of the original signed form and the electronic notification of receipt of the form. See § 225.27(c).

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### 2. Definitions

Section 225.5 contains definitions as used in this Part. Section 225.19 sets forth which accidents/incidents are reportable. The definitions and guidance listed below are supplemental to the definitions found in Part 225, and are provided to assist railroads in the context of accident/incident reporting.

**Casualty.** A reportable death, injury, or illness arising from the operation of a railroad. Casualties may be classified as either fatal or nonfatal.

#### Classification of Persons

**Worker on Duty—Railroad Employee (Class A).** An individual who receives direct monetary compensation from the railroad. Whether the worker is under pay will generally, but not always, be the deciding factor for determining “on duty” status. For example, an employee on unpaid lunch break is "on duty." Moreover, an employee who is not under pay, but engaged in work-related activity is "on duty."

Note: An employee in deadhead transportation is considered an “employee on duty,” regardless of the mode of transportation. Deadhead transportation occurs when an employee is traveling at the direction or authorization of the carrier to or from an assignment, or the employee is involved with a means of conveyance furnished by the carrier or compensated for by the carrier.

Exception: If an employee is housed by the carrier in a facility such as a motel, and part of the service provided by the motel is the transportation of the employee to and from the work site, any reportable injury to the employee during such transit is to be recorded as that to a Railroad Employee Not On Duty (Class B). Likewise, if the employee decides upon other means of transportation that is authorized or provided, and for which he would not have been compensated by the railroad, the injury is not considered to be an on-duty injury.

**Railroad Employee Not On Duty (Class B).** An individual who receives direct monetary compensation from the railroad and who is on railroad property for purposes connected with his or her employment or with other railroad permission but is not “on duty.”

**Worker on Duty—Contractor (Class F).** An employee of a contracting agency for a railroad who does not receive direct monetary compensation from the railroad and who,



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while on railroad property, is engaged in either 1) the operation of on-track equipment, or 2) any other safety-sensitive function for the railroad as defined in § 209.303.

Section 209.303 describes “safety-sensitive functions” as applying to the following individuals:

- (a) Railroad employees who are assigned to perform service subject to the Hours of Service Act (45 U.S.C. 61-64b<sup>2</sup>) during a duty tour, whether or not the person has performed or is currently performing such service, and any person who performs such service;
- (b) Railroad employees or agents who:
  - (1) Inspect, install, repair, or maintain track and roadbed;
  - (2) Inspect, repair, or maintain, locomotives, passenger cars, and freight cars;
  - (3) Conduct training and testing of employees when the training or testing is required by the FRA’s safety regulations; or
- (c) Railroad managers, supervisors, or agents when they:
  - (1) Perform the safety-sensitive functions listed in paragraphs (a) and (b) of this section;
  - (2) Supervise and otherwise direct the performance of the safety-sensitive functions listed in paragraph (a) and (b) of this section; or
  - (3) Are in a position to direct the commission of violations of any of the requirements of parts 213 through 236 of this title.

Note: There have been amendments and additions to the set of railroad safety regulations found in the CFR; thus, the term “safety-sensitive functions” in § 209.303(c)(3) is interpreted to include railroad managers, supervisors, etc., when they are in a position to direct the commission of violations of any of the requirements of Parts 213 through 240 of Title 49 of the CFR.

Hours worked by persons in the Class F, G, H, and I categories are not reported on any FRA form.

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<sup>2</sup> In 1994, the Hours of Service Act was repealed by Congress as part of a broad recodification of the Federal transportation laws. See Act of July 5, 1994, Pub. L. No. 103-272, 108 Stat. 745. The Act, which had been in Title 45, was repealed and recodified primarily as Chapter 211 of Title 49 of the U.S. Code. Congress made clear that the recodification was not intended to make substantive changes in the affected laws, even though it altered their arrangement and language in certain respects. See Pub. L. No. 103-272, § 6(a), 108 Stat. 1378; H.R. Rep. No. 180, 103d Cong., 1st Sess. 1-5 (1993), reprinted in 1994 U.S. CODE CONG. & ADMIN. NEWS 818-822.

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**Contractor—Other (Class G).** A contractor employee for a railroad who does not receive direct monetary compensation from the railroad and who is not engaged in either 1) the operation of on-track equipment, or 2) any other safety-sensitive function for the railroad. Hours worked by this person are not reported on any FRA form.

**Worker on Duty—Volunteer (Class H).** A volunteer who does not receive direct monetary compensation from the railroad and who is engaged in either 1) the operation of on-track equipment, or 2) any other safety-sensitive function for the railroad as defined in § 209.303. (See this list under “Worker on Duty-Contractor.”)

Hours worked by a “Worker on Duty—Volunteer” (Class H) are not reported on any FRA form.

**Volunteer—Other (Class I).** A volunteer who does not receive direct monetary compensation from the railroad and who is not engaged in either 1) the operation of on-track equipment, or 2) any other safety-sensitive function for the railroad as defined in § 209.303. Hours worked by this person also not reported on any FRA form.

**Passengers On Trains (Class C).** Persons who are on, boarding, or alighting from railroad cars for the purpose of travel.

**Nontrespassers—On Railroad Property (Class D).** Persons lawfully on the part of railroad property that is used in railroad operation (other than those herein defined as employees, passengers, trespassers, volunteers, or contractor employees), and persons adjacent to railroad premises when they are injured as the result of the operation of a railroad. This class also includes other persons on vessels or buses, whose use arises from the operation of a railroad.

**Nontrespassers—Off Railroad Property (Class J).** An injury “off railroad property” includes an injury resulting from an event, such as a derailment or collision, that begins on railroad property but ends on public or private non-railroad property, so long as the injury is incurred while the person is physically located off railroad property. Similarly, if a derailment results in a release of hazardous materials onto public or private non-railroad property and the hazardous material injures a “Nontrespasser” located on public or private non-railroad property, the injury is reported as an injury to “Nontrespassers—Off Railroad Property” (Class J). Conversely, injuries to nontrespassers occurring while on public or private railroad property are reported as injuries to “Nontrespassers—On Railroad Property” (Class D).

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**Trespassers (Class E).** Persons who are on the part of railroad property used in railroad operation and whose presence is prohibited, forbidden, or unlawful. Employees who are trespassing on railroad property are to be reported as “Trespassers” (Class E).

Note: A person on a highway-rail crossing should not be classified as a Trespasser (Class E) unless: 1) the crossing is protected by gates or other similar barriers, which were closed when the person went on the crossing, or 2) the person attempted to pass over, under, or between cars or locomotives of a consist occupying the crossing. A person or vehicle that enters the crossing without a physical barrier (e.g., gates in a lowered position) is not classified as a trespasser, even when the highway-rail crossing lights are activated or other warning systems are functioning. The person would be classified as a Nontrespasser.

**Closed Crossing.** A closed crossing is a location where a crossing has been physically removed or where rail operations or highway traffic is not possible. This does not include crossings that are temporarily closed for repairs to the track structure, crossing surface, or roadway approaches. Examples are locations where the crossing has been barricaded and highway crossing surface material removed; where the railroad tracks have been cut or barricaded or physically removed; where a connecting turnout has been removed; or where rail operations are not possible because the railroad tracks are paved over, etc. Crossings along such inactive railroad lines are closed.

**Barricaded Crossing.** A highway-rail grade crossing that is temporarily closed to highway users. A barricaded crossing does not constitute a “closed” crossing.

**Consist Responsibility.** The railroad employing the crew members operating the consist at the time of the accident normally determines the consist owner for reporting purposes. An exception to this rule is when a railroad is under contract to operate another railroad on an ongoing basis. This situation often exists in connection with commuter operations where the entity is known to the general public as the commuter authority, not the railroad under contract (see Chapter 12 for additional guidance).

**Collision.** A collision is defined as an impact between on-track equipment consists while both are on rails and where one of the consists is operating under train movement rules or is subject to the protection afforded to trains. This definition includes instances where a portion of a consist occupying a siding is fouling the main line and is struck by an approaching train. It does not include impacts occurring while switching within yards, as in making up or breaking up trains, shifting or setting out cars, etc. Impacts of this type are to be classified as “Other Impacts” accidents (Code “12” in item 7 on Form F 6180.54), when all consists involved are part of the switching movement.

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The time table, or schedule direction, should govern the classification of collisions when either one of the trains or the locomotives is at rest, or when its incidental movement temporarily differs from the schedule direction.

**Head-On Collision.** A collision in which the trains or locomotives, or electric multiple-unit (EMU) or diesel multiple-unit (DMU) trains, involved are traveling in opposite directions on the same track, provided that both consists have a locomotive (or EMU or DMU trains).

**Rear-End Collision.** A collision in which the trains or locomotives (or EMU or DMU trains) involved are traveling in the same direction on the same track, provided that both consists have a locomotive (or EMU or DMU trains).

**Side Collision.** A collision at a turnout where one consist strikes the side of another consist.

**Raking Collision.** A collision between parts or lading of a consist on an adjacent track, or with a structure such as a bridge.

**Broken Train Collision.** A collision in which a moving train breaks into parts and an impact occurs between these parts, or when a portion of the broken train collides with another consist.

Note: The several parts of a broken train are not to be treated as separate consists for reporting purposes. Information concerning such trains are to be reported on a single form.

**Railroad Crossing Collision.** A collision between on-track railroad equipment at a point where tracks intersect.

### **Costs and Reportable Damage.**

**Reporting Threshold.** The amount of total reportable damage resulting from a train accident which, if exceeded, requires the preparation and forwarding of form FRA F 6180.54 by the railroads involved. For accidents that occurred in calendar years 2002-2005, the reporting threshold was \$6,700. For accidents that occurred in calendar year 2006, the reporting threshold is \$7,700; and for accidents that occur in calendar year 2007, the reporting threshold is \$8,200. Pursuant to § 225.19 (e), the reporting threshold will be revised annually according to the formula set forth in Appendix B to Part 225. Please refer to <http://safetydata.fra.dot.gov/OfficeofSafety> and click on “Changes in Railroad Accident/Incident Recordkeeping and Reporting Info” for updated information.

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**Reportable Damage.** Reportable damage includes labor costs and all other costs to repair or replace in-kind damaged on-track equipment, signals, track, track structures, or roadbed. Reportable damage does not include the cost of clearing a wreck; however, additional damage to the above-listed items caused while clearing the wreck is to be included in the damage estimate.

Examples of other costs included in reportable damage are: 1) rental and/or operation of machinery such as cranes, bulldozers, including the services of contractors, to replace or repair the track right-of-way and associated structures; and 2) costs associated with the repair or replacement of roller bearings on units that were derailed or submerged in water. (Replacement costs include the labor costs resulting from a wheelset changeout.)

**Equipment Damage.** All costs, including labor and material, associated with the repair or replacement in-kind of on-track rail equipment. Trailers/containers on flat cars are considered to be lading and damage to these is not to be included in on-track equipment damage. Damage to a flat car carrying a trailer/container is to be included in reportable damage.

When on-track equipment is damaged beyond repair, the total reproduction cost of the equipment, including betterments and additions, is to be calculated in accordance with Rule 107 of the current edition of the field manual of the Association of American Railroads (AAR) Interchange Rules. The total reproduction cost may be depreciated to reflect the amount of usage to which the equipment has been subjected. Depreciation percentages will be determined at 3 percent annually for a maximum of 30 years; equipment over 30 years old will be valued at 10 percent of the total reproduction cost. Replacement-in-kind costs for equipment damaged beyond repair is the result of these calculations.

**Track Damage.** All costs, including labor and material, associated with the repair or replacement in-kind of signals, track, track structures (including bridges or tunnels), damaged equipment detectors (e.g., hot box detector), switches, or other electronic equipment; or roadbeds that were damaged in a collision, derailment or other reportable event.

When track, signals, structures, etc., are damaged beyond repair, the current cost of new materials is to be used. However, replacement of secondhand rail with secondhand rail may be charged at the current cost of such rail.

When estimating damage costs, the labor costs to be reported are only the direct labor costs to the railroad, e.g., hourly wages, transportation costs, and hotel expenses. The

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cost of fringe benefits is excluded when calculating direct labor costs. Overhead is also excluded when calculating damage costs due to the unacceptable non-uniform treatment of overhead under the current process.

For services performed by a contractor, a direct hourly labor cost is calculated by multiplying the contractor's total labor hours charged to the railroad by the applicable direct hourly wage rate for a railroad worker in that particular craft. However, if a railroad cannot match the equivalent craft to the labor hours spent by a contractor, then the railroad must use the loaded rate, i.e., the cost by hour for labor, fringe benefits, and other costs and fees for services charged by the contractor for the tasks associated with the repair of the track, equipment, and structures due to a train accident.

**Derailment.** A derailment occurs when on-track equipment leaves the rail for a reason other than a collision, explosion, highway-rail crossing impact, etc.

**Direct Train Control.** This is an FRA umbrella term and refers to modern-day derivatives of traditional timetable/train order methodology. These methods of control have greatly modernized and simplified train operations by eliminating timetable schedules, train registers, superiority, and the attendant array of complicated operating rules. These systems are predicated on the train dispatcher having direct and continuous radio contact with all trains; hence the informal name "radio train dispatching." In place of the train order, there is a written document known variously as a track warrant, DTC clearance, OCS clearance, track permit, Form D, etc. There are two basic direct train control systems presently in use on today's railroads: one that uses fixed blocks (i.e., the limits are constant and are identified both in the timetable and by wayside signs); and one that uses variable blocks (i.e., the limits are not constant and are created by the train dispatcher for each train).

These systems are variously identified in the industry as:

1. Track Warrant Control (TWC)
2. Direct Traffic Control (called Direct *Train* Control on some roads) (DTC)
3. Form D Control System (DCS)
4. Occupancy Control System (OCS)
5. Manual Block System (MBS)

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(**Note:** these could all be considered stand-alone methods of operation and may be shown as such.)

**Drug/Alcohol Test.** A drug/alcohol test produces a physical or chemical reaction by which a substance may be detected or its properties ascertained, and includes both Federal and employer-authorized tests to determine alcohol or drug usage. A test performed under FRA requirements

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is considered positive when the test result has been verified as positive by a medical review officer and reported to the employer. A test performed under other authorization is considered positive when the employer will defend the results if legally challenged. (Refer to 49 CFR Part 219, Control of Alcohol and Drug Use, for additional information.)

**First Aid Treatment.** Treatment that is limited to simple procedures used to treat minor conditions, such as abrasions, cuts, bruises, and splinters. First aid treatment is typically confined to a single treatment and does not require special skills or procedures. First aid treatment is specifically addressed in Chapter 6 of this Guide.

**Gap Incident.** A reportable injury involving a person who, while involved in the process of boarding or alighting a passenger train at a rail car door threshold plate at a high level passenger boarding platform (i.e., a platform that is 48" or more above the top of the rail), has one or more body parts enter the area between the car body and the edge of the platform or traveling between passenger cars. The following are examples of a Gap Incident:

- While boarding or alighting a passenger train at a high level passenger boarding platform a person misjudges the gap, resulting in the person's leg entering the gap.
- While boarding or alighting a passenger train at a high level passenger boarding platform, a person is struck by a closing door, resulting in the person's leg entering the gap.

The following are not examples of a Gap Incident:

- While boarding or alighting a passenger train at a high level passenger boarding platform, a person misjudges the gap and falls into the vestibule or platform, without a body part entering the gap.
- While walking on a passenger station at a high level passenger boarding platform, a person slips on the platform, at a location other than the rail car door threshold, resulting in the person's leg entering the gap.

Gap injuries usually occur when the high level platform station is concave, convex, misalignment between the platform and passenger car or when a person is traveling between cars and has one or more body parts enter the area between the cars.

**Hazardous Material.** A substance or material, including a hazardous substance, which has been determined by the Secretary of Transportation to be capable of posing an unreasonable risk to health, safety, and property when transported in commerce, and which has been so designated. See 49 CFR 171.8.

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**Hazardous Material Residue.** The hazardous material remaining in a packaging, including a tank car, after its contents have been unloaded to the maximum extent practicable and before the packaging is either refilled or cleaned of hazardous material and purged to remove any hazardous vapors.

Additional guidance concerning Federal requirements as to the identification and shipment of hazardous material can be found in 49 CFR Parts 100 to 180.

### **Miles Traveled.**

**Passenger-mile.** The movement of a passenger for a distance of 1 mile.

**Train-mile.** The movement of a train for a distance of 1 mile. Mileage is not to be increased because of the presence of multiple locomotives in the train. (See definition of “train.”)

**Yard Switching Train-Mile.** May be computed at the rate of 6 mph for the time actually engaged in yard switching service (or any other method that will yield a more accurate count) if actual mileage is not known.

**Operation of a Railroad.** Inclusive term used to describe all activities of a railroad related to the performance of its rail transportation business.

### **Other Accidents.**

**Highway-Rail Crossing Accident/Incident.** An impact between on-track railroad equipment and a highway user (e.g., an automobile, bus, truck, motorcycle, bicycle, farm vehicle, pedestrian, or other highway user) at a designated crossing site. Sidewalks, pathways, shoulders and ditches associated with the crossing are considered to be part of the crossing site. The term “highway user” includes pedestrians, cyclists, and all other modes of surface transportation, motorized and unmotorized.

**Obstruction Accident.** An accident/incident in which a consist strikes: 1) a bumping post or a foreign object on the track right-of-way; 2) a highway vehicle at a location other than a highway-rail crossing site; 3) derailed equipment; or 4) a track motorcar or similar work equipment not equipped with AAR couplers, and not operating under train rules.

**Explosion-Detonation.** An accident/incident caused by the detonation of material carried by or transported by rail. A detonation occurs when a shock wave exceeds the speed of sound. Explosions-detonations resulting from mishaps during loading or



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unloading operations, and those caused by fire aboard on-track equipment are included in this definition.

**Fire or Violent Rupture.** An accident/incident caused by combustion or violent release of material carried by or transported by rail. Examples of this type include: fuel and electrical equipment fires; crankcase explosions; and violent releases of liquefied petroleum gas or anhydrous ammonia.

**Other Impacts.** An accident/incident, not classified as a collision, that involves contact between on-track equipment. Generally, these involve single cars or cuts of cars that are damaged during switching, train makeup, setting out, etc., operations. If both consists contain a locomotive, EMU train, or DMU train, the event should be classified as a collision between trains.

**Other Accidents/Incidents.** Events not classified as one of the preceding types.

### On-Track Rail Equipment.

**Equipment Consist.** An equipment consist is a train, locomotive(s), cut of cars, or a single car not coupled to another car or locomotive.

**Car.** A car is:

- (1) Any unit of on-track equipment designed to be hauled by locomotives, or
- (2) Any unit of on-track work equipment such as a track motorcar, highway-rail vehicle, push car, crane, or ballast tamping machine.

**Locomotive.** A locomotive is a piece of on-track equipment other than hi-rail, specialized maintenance, or other similar equipment:

- (1) With one or more propelling motors designed for moving other equipment;
- (2) With one or more propelling motors designed to carry freight or passenger traffic or both; or
- (3) Without propelling motors but with one or more control stands.

**Control Cab Locomotive.** A locomotive without propelling motors but with one or more control stands. Note: A control [cab] car locomotive is to be counted as a car and not as a locomotive unit in the Rail Equipment Accident/Incident Report.

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**DMU Locomotive.** A diesel-powered multiple-unit operated locomotive with one or more propelling motors designed to carry passenger traffic. Note: A DMU locomotive is to be counted as a car and not as a locomotive unit in the Rail Equipment Accident/Incident Report.

**EMU Locomotive.** An electric multiple-unit operated locomotive:

- (1) With one or more propelling motors designed to carry freight or passenger traffic or both; or
- (2) Without propelling motors but with one or more control stands.

Note: An EMU locomotive is to be counted as a car and not as a locomotive unit in the Rail Equipment Accident/Incident Report.

See special instructions in Chapter 7 when reporting DMUs, EMUs, or Cab Car Locomotives.

**Motorcar.** A self-propelled unit of equipment designed to carry freight or passenger traffic. (Does not include track motor cars or similar work equipment.)

**Train.** For purposes of accident/incident reporting, a train is a locomotive or locomotives coupled with or without cars, and with or without markers displayed. This definition includes trains consisting entirely of self-propelled units designed to carry passengers, freight traffic, or both.

**Yard Switching Trains.** Trains operated primarily within yards for the purpose of switching other equipment. Examples include the making up or breaking up of trains, service industrial tracks within yard limits, storing or classifying cars, and other similar operations.

Note: Switching performed by a road crew that is incidental to the road operation is not included.

**Work train.** Work trains are non-revenue trains used for the administration and upkeep service of the railroad. Examples are: official trains; inspection trains; special trains running with a company fire apparatus to save the railroad's property from destruction; trains that transport the railroad's employees to and from work when no transportation charge is made; construction and upkeep trains run in connection with maintenance and improvement work; and material and supply trains run in connection with operations.

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**Person.** Includes all categories of entities covered under 1 U.S.C. § 1, including, but not limited to: a railroad; any manager, supervisor, official, or other employee or agent of a railroad; any owner, manufacturer, lessor, or lessee of railroad equipment, track, or facilities; any passenger; any trespasser or nontrespasser; any independent contractor providing goods or services to a railroad; any volunteer providing goods or services to a railroad; and any employee of such owner, manufacturer, lessor, lessee, or independent contractor.

**Prescription Medication.** Substances whose availability and distribution are controlled by registered medical professionals such as doctors, pharmacists, or nurses, and that are manufactured and packaged with the legend: “Caution—Federal Law Prohibits Dispensing Without Prescription,” or a similar warning.

**Physician or Other Licensed Health Care Professional (PLHCP).** A health care professional operating within the scope of his or her license, registration, or certification. In addition to licensed physicians, the term “Other Licensed Health Care Professional” includes members of other occupations associated with patient care and treatment, such as chiropractors, podiatrists, physician’s assistants, psychologists, and dentists.

**Remote Controlled Locomotive (RCL).** This term refers to on-track rail equipment that is controlled by an employee or contractor using a remote transmitter/receiver designed to control the locomotive, maintenance machine, or other type of self-propelled on-track rail equipment. Special coding instructions are to be used when casualties to persons, rail equipment accidents/incidents, and highway-rail grade crossing accidents/incidents occur when an RCL is in use.

### **Tracks and Types of Tracks.**

**Main Track.** A track, other than an auxiliary track, extending through yards or between stations, upon which trains are operated by time table or train order or both, or the use of which is governed by a signal system.

**Industry Track.** A switching track, or series of tracks, serving the needs of a commercial industry other than a railroad.

**Siding.** A track auxiliary to the main track used for meeting or passing trains.

**Yard Track.** A system of tracks within defined limits used for the making up or breaking up of trains, for the storage of cars, and for other purposes over which movements not authorized by time table or by train order may be made, subject to prescribed signals, rules or other special instructions. Sidings and industry tracks are not included, nor is main line within yard limits.

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**Vehicle.** "Vehicle" includes automobiles, buses, trucks, motorcycles, bicycles, farm vehicles, and all other modes of surface transportation, motorized and unmotorized.

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### 3. Form FRA F 6180.55 - Railroad Injury and Illness Summary

#### 3.1 Requirement

Form FRA F 6180.55, titled “Railroad Injury and Illness Summary,” is used to summarize a railroad’s accident/incident data for a given month. A report must be filed each month, even when no accidents/incidents occurred during the reporting month. See § 225.21(b).

#### 3.2 General Instructions and Interpretations

If there were no accidents/incidents for the month being reported, this fact must be noted on the form.

If actual operational data (mileage, hours worked, etc.) are not available when the report is due, then an estimate must be provided. A corrected report must be sent when actual figures are known. See § 225.13.

If there are substantial fluctuations in month-to-month operational data, the reason for such variations (seasonal operation, strikes, consolidation, line abandonment, etc.) are to be explained.

A late or corrected report is not to be included in the counts for the current month. If such a report is forwarded with the regular submission, it must have a separate cover letter indicating that it is a corrected report or, for late submissions, explaining why the report is being filed late. See § 225.13. Entries changed on corrected reports should be circled in red.

If an item such as “Passenger-Miles Operated” does not apply to your railroad, enter “N/A.”

Fractions and decimals are to be rounded to the nearest whole number.

#### 3.3 Instructions for Completing Form FRA F 6180.55

<u>Item</u>	<u>Instruction</u>
-------------	--------------------

- |    |   |
|----|---|
| 1. | <u>Name of Reporting Railroad</u><br>Enter the full name of the reporting railroad. |
| 2. | <u>Alphabetic Code</u><br>Enter the reporting railroad’s code, found in Appendix A. |
| 3. | <u>Report Month &amp; Year</u><br>Enter the month and year covered by the report.   |

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4. State Alphabetic Code  
Enter the code for the State in which the report was signed, found in Appendix B.
5. County  
Enter the name of the county or parish in which the report was signed.
6. Name of Reporting Officer  
Enter the reporting officer's name.
7. Official Title  
Enter the reporting officer's official title.
8. Address  
Enter the reporting officer's mailing address.
9. Telephone  
Enter the reporting officer's telephone number.
10. Date and sign as directed (notarization no longer required).

*Operational Data and Accident/Incident Counts for Report Month.* In items 11-14, do not duplicate mileage in more than one block. For example, do not include yard switching train miles in the total for either freight or passenger train-miles. For items 11-17, report only the miles and hours associated with your operations.

\*\*\*\*\*

Example for calculating items 12 (Passenger Train Miles), 16 (Passenger Miles Operated), and 17 (Number of Passengers Transported):

Enter miles and passengers into a spreadsheet, listed by date of each trip, and then enter totals into correct items in the FRA Form F 6180.55. Note: Be sure to first multiply each separate trip's "Passengers Transported" by each separate trip's "Passenger Train-Miles" to get each separate trip's "Passenger-Miles Operated," and then sum each of these results to get the total. For the case of having multiple trips, DO NOT multiply "Total" "Passengers Transported" by "Total" "Passenger Train-Miles" to find total "Passenger-Miles Operated."

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See example below:

Date	Item 17: Pass. Transp.	x	Item 12: Pass. Train Miles	=	Item 16: Pass. Miles Oper.
07/01/2006	85	x	12	=	1020
07/15/2006	121	x	8	=	968
07/21/2006	217	x	8	=	1736
07/23/2006	<u>177</u>	x	<u>8</u>	=	<u>1416</u>
Total	600		36		5140

In this example, **600** would be entered into Item 17, **36** into Item 12, and **5140** into Item 16.

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11. Freight Train-Miles

Enter the number of train-miles run during the month in freight service.

Note: Be careful not to report Freight Train-Miles that are being reported by another railroad. This may occur if one railroad's equipment is being operated over the track by a different railroad's crew. In this case, the railroad of the crew operating the equipment will enter the Freight Train-Miles on their FRA Form F 6180.55.

12. Passenger Train-Miles

Enter the number of train-miles run during the month in passenger service.

13. Yard Switching Train-Miles

Enter the number of yard switching miles run during the month.

14. Other Train-Miles

Enter any other train-miles run that are not included in freight, passenger, or yard switching train-miles.

15. Railroad Worker [Employee] Hours

Enter the number of hours worked by all railroad employees during the month. Include all employees in the occupation categories shown in Appendix D. Do not include time paid, but not actually worked, such as holidays or vacations. Only those hours worked by employees defined as "Class A" are to be counted. Hours worked by volunteers, contractors, etc., are excluded.

16. Passenger-Miles Operated

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If your railroad operates a rail passenger service, enter the number of passenger-miles run during the month. If passenger-miles are shown, the number of passengers transported must be entered in item 17.

Please take special care when recording information on passenger service. Our data verification procedures examine the relationship among the number of passenger train miles reported in item 12, the number of passenger miles reported in item 16, and the number of passengers transported as reported in item 17. If any of these items contains an entry greater than 0, then it is generally assumed that all three items must have a count. A simple example of a single train movement can demonstrate this: A passenger train containing 250 passengers traveled from point A to point B for a distance of 100 miles. This would be recorded as 100 passenger train-miles, 25,000 passenger miles (250 passengers x 100 miles), and 250 passengers transported.

17. Number of Passengers Transported  
Enter the number of passengers transported by rail for the month being reported.
18. Reported Casualties  
Reportable casualties to all types of persons are to be reported on this form and are to be categorized according to the type of person. All fatalities, including those due to illness, are to be recorded in the appropriate blocks under the “Fatal” column. All remaining cases, including nonfatal occupational illnesses, are to be shown under the “Nonfatal” column. If no reportable casualties occurred during the report month, enter the word “None” for the “Grand total.” All casualties shown must also be reported individually on Form FRA F 6180.55a.

Each person is to be classified as one of the following:

- a. Worker on Duty—Railroad Employee (Class A),
- b. Railroad Employee Not On Duty (Class B),
- c. Passengers on Trains (Class C),
- d. Nontrespassers—On Railroad Property (Class D),
- e. Trespassers (Class E),
- f. Worker on Duty—Contractor (Class F),
- g. Contractor—Other (Class G),
- h. Worker on Duty—Volunteer (Class H),
- i. Volunteer—Other (Class I), and



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j. Nontrespassers—Off Railroad Property (Class J).

19. Number of FRA Forms Attached

List the number of FRA report forms completed during the month:

- F 6180.54 Enter the number of forms used to report collisions, derailments, and similar events when a rail equipment accident/incident is being reported.
- F 6180.55a Enter the number of forms used to record reportable casualties. If, during the report month, a person is injured and dies on the following day, or on any day prior to the end of the month, this should be reported as a fatality on Form FRA F 6180.55a.
- F 6180.56 Enter the number of forms used to report employee hours and casualties. This is usually “0” for each month, except for December, where “1” is normally entered.
- F 6180.57 Enter the number of forms used to report impacts between railroad and highway users at crossings.
- F 6180.81 Enter the number of Employee Human Factor Attachments which are attached.

20. Remarks Section

Enter any remarks, including explanations for unusual fluctuations in train-miles operated, employee hours, passenger counts, etc., or operational characteristics that result in contradictory or confusing counts (for example, train-miles are reported, but there are no railroad worker [employee] hours).

### 3.4 Common Reporting Errors

*Missing Data.* If the information required for an item is not available at the time a report is to be filed, an estimate should be used. Later, if it is determined that the actual value was substantially different from the estimated value, a corrected report must be forwarded.

*Math Errors.* The total number and distribution of casualties reported must agree with the sum of the individual casualties on Form FRA F 6180.55a.

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*Contradictory Information.* If employee casualties are reported, the number of railroad worker hours cannot be “0.”

If Rail Equipment Accident/Incident Reports (Form FRA F 6180.54) or Highway-Rail Grade Crossing Accident/Incident Reports (Form FRA F 6180.57) were prepared for accidents/incidents involving moving trains, the total number of miles run during the month cannot be “0.”

If the entry in “Passenger-Miles Operated” is greater than “0,” the entry in “Number of Passengers Transported” cannot be “0,” and vice versa.

If passenger casualties are reported, the entry in “Number of Passengers Transported” cannot be “0.”

### **3.5 Submission and Retention**

Railroads must submit a hard copy of the Railroad Injury and Illness Summary (Form FRA F 6180.55), signed under penalty of perjury by the railroad’s reporting officer. In lieu of the hard copy, a railroad may submit to the FRA, via e-mail at [aireports@frasafety.net](mailto:aireports@frasafety.net), an electronic image of the completed and signed hard-copy form, in .pdf or .jpg formats only. See § 225.37(b)(3). If a railroad submits the form(s) to FRA electronically via the Internet, the railroad must retain the original signed hard copy submission for at least 5 years after the calendar year to which it pertains. See § 225.27. If the submission is made using the Internet, the railroad must also retain a hard copy of FRA's acknowledgement of receipt for a period of 5 years.

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### 4. Form FRA F 6180.98 - Railroad Employee Injury and/or Illness Record

#### 4.1 Requirement

Each railroad shall maintain either the Railroad Employee Injury and/or Illness Record (Form FRA F 6180.98) or an alternative railroad-designed record of all reportable and all accountable injuries and illnesses of its employees. Include reportable and accountable injuries and illnesses of railroad employees (that is, Worker on Duty—Railroad Employee (Class A) or Railroad Employee Not On Duty (Class B)). See § 225.25(a)-(b). Do not include injuries or illnesses of volunteers or contractors. See also § 225.3 regarding certain railroads exempted from the duty to record “accountables.”

Accountable injury or illness means any abnormal condition or disorder of a railroad employee that causes or requires the railroad employee to be examined or treated by a qualified health care professional but does not meet the general reporting criteria listed in § 225.19(d)(1) through (d)(6). When such condition or disorder manifests *within* the work environment it is an accountable injury or illness regardless of whether the condition or disorder is discernably caused by an event or exposure in the work environment. When such condition or disorder manifests *outside* the work environment it is an accountable injury or illness if the condition or disorder is discernably caused by an event or exposure in the work environment.

The alternative railroad-designed record may be used in lieu of the Railroad Employee Injury and/or Illness Record (Form FRA F 6180.98). Any such alternative record shall contain all of the information required on the Railroad Employee Injury and/or Illness Record. Although this information may be displayed in a different order from that on the Railroad Employee Injury and/or Illness Record, the order of the information shall be consistent from one such record to another such record. The order chosen by the railroad shall be consistent for each of the railroad’s reporting establishments. Railroads may list additional information on the alternative record, beyond the information required on the Railroad Employee Injury and/or Illness Record.

Furthermore, railroads may use their alternative record to collect information on conditions that do not meet the “accountable” definition, or to make entries for individuals other than employees of the railroad. (See question Q4 and corresponding answer in Chapter 1 for additional guidance.)

It would be difficult, if not impossible, for a railroad to monitor self-treatment of minor injuries. Thus, the type of injuries that are generally expected to be recorded on the “Railroad Employee Injury and/or Illness Record” (Form FRA F 6180.98) are those that create a “documentation trail.” This documentation could include records such as: incident reports; health care provider records; or any other records that may identify the fact that an employee has sustained physical harm while in the work environment that required examination or treatment by a qualified health care professional. See § 225.5, definition of “accountable injury or illness.” This broad scope is

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necessary since all conditions, regardless of severity, must be evaluated to determine if the requirements necessary for reporting the injury/illness have been met.

A primary purpose for the recording of accountable cases is to establish a standardized set of data that the reporting officer will use in deciding whether or not to report a case. It also serves as a tool for FRA Safety Assurance and Compliance officers to use during reviews to determine if proper reporting decisions are being made. Once it has been determined that a particular case is reportable and has been forwarded on Form FRA F 6180.55a, it is no longer necessary to continue to update this record; however the railroad should update "Was the case reported?" on Form FRA F 6180.98 (or update, in the alternative railroad-designed record, if a Form FRA F 6180.55a has been filed with FRA). Changes to counts of days absent or restricted are to be made on Form FRA F 6180.55a, not Form FRA F 6180.98.

Each railroad shall enter each reportable and each accountable injury and illness on the appropriate record as early as practicable, but no later than 7 working days after receiving information or acquiring knowledge that an injury or illness has occurred. See § 225.25(f).

The records described above may be maintained at the local establishment or, alternatively, at a centralized location. If the records are maintained at a centralized location, but not through electronic means, then a paper copy of the records that is current within 35 days of the month to which it applies shall be available for that establishment. If the records are maintained at a centralized location through electronic means, then the records for that establishment shall be available for review in a hard copy format within 4 business hours of FRA's request. FRA recognizes that circumstances outside the railroad's control may preclude it from fulfilling the 4 business-hour time limit. In these circumstances, FRA will not assess a monetary penalty against the railroad for its failure to provide the requested documentation provided the railroad makes a reasonable effort to correct the problem. See § 225.25(g).

Do not submit this form or an alternate railroad-designed record. If a case is determined to be reportable, it must be recorded on Form FRA F 6180.55a and included with the reports filed for that month.

The information required to be recorded on Form FRA F 6180.98 is self-explanatory; therefore, specific instructions for completion are not needed. However, it is important to note that the "Case/Incident Number" identified in block 2 must be used on Form FRA F 6180.55a for any case determined to be reportable.

The alternative record shall contain, at a minimum, the following information:

1. Name of railroad;
2. Case/incident number;
3. Full name of railroad employee;

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4. Date of birth of railroad employee;
5. Gender of railroad employee;
6. Railroad employee identification (ID) number;
7. Date the railroad employee was hired;
8. Home address of railroad employee, including the street address, city, State, zip code, and home telephone number with area code;
9. Name of facility where railroad employee normally reports to work;
10. Address of facility where railroad employee normally reports to work, including the street address, city, State, and zip code;
11. Job title of railroad employee;
12. Department assigned;
13. Specific site where accident/incident/exposure occurred, including the city, county, State, and zip code;
14. Date and time of occurrence, indicated using military time or a.m./p.m.;
15. Time employee's shift began, indicated using military time or a.m./p.m.;
16. Whether employee was on premises when injury occurred;
17. Whether employee was on or off duty;
18. Date and time when employee notified company personnel of condition, indicated using military time or a.m./p.m.;
19. Name and title of railroad official notified;
20. Description of the general activity this employee was engaged in prior to the injury/illness/condition;
21. Description of all factors associated with the case that are pertinent to an understanding of how it occurred. Include a discussion of the sequence of events leading up to it, and the tools, machinery, processes, material, environmental conditions, etc., involved;
22. Description, in detail, of the injury/illness/condition that the employee sustained, including the body parts affected. If a recurrence, list the date of the last occurrence;
23. Identification of all persons and organizations used to evaluate or treat the condition, or both. Include the facility, provider and complete address;
24. Description of all procedures, medications, therapy, etc., used or recommended for the treatment of the condition;
25. Extent and outcome of injury or illness to show the following, as applicable:

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- a. Fatality—enter date of death;
  - b. Restricted work, number of days, beginning date;
  - c. Occupational illness, date of initial diagnosis;
  - d. Instructions to obtain prescription medication, or receipt of prescription medication;
  - e. If missed 1 or more days of work or next shift, provide number of work days and beginning date;
  - f. Medical treatment beyond “first aid”;
  - g. Hospitalization for treatment as an inpatient;
  - h. Multiple treatments or therapy sessions;
  - i. Loss of consciousness;
  - j. Transfer to another job or termination of employment;
  - k. Significant injury/illness, one meeting specific case criteria, or a covered data case.
26. Each railroad shall indicate if the Railroad Injury and Illness Summary (Continuation Sheet) (FRA Form F 6180.55a) has been filed with FRA for the injury or illness. If FRA Form F 6180.55a was not filed with FRA, then the railroad shall provide an explanation of the basis for its decision.
27. The railroad shall indicate if the injured or ill railroad employee was provided an opportunity to review his or her file; and
28. The railroad shall identify the preparer’s name, title, telephone number with area code, and the date the record was initially signed/completed.

## **5. Form FRA F 6180.97 - Initial Rail Equipment Accident/Incident Record**

### **5.1 Requirement**

Each railroad shall maintain the Initial Rail Equipment Accident/Incident Record (Form FRA F 6180.97), or an alternative railroad-designed record as described in the following section, for reportable and accountable collisions, derailments, fires, explosions, acts of God, or other events involving the operation of railroad on-track equipment, signals, track, or track equipment (standing or moving) that result in damages to railroad on-track equipment, signals, tracks, track structures, or roadbed, including labor costs and all other costs for repairs or replacement in-kind for each railroad establishment. See §§ 225.21(i) and 225.25(d)-(g). See also § 225.3 regarding certain railroads exempted from recording “accountables.”

The alternative railroad-designed record may be used in lieu of the Initial Rail Equipment Accident/Incident Record (Form FRA F 6180.97). Any such alternative record shall contain all of the information required on the Initial Rail Equipment Accident/Incident Record. Although this information may be displayed in a different order from that on the Initial Rail Equipment Accident/Incident Record, the order of the information shall be consistent from one such record to another such record. The order chosen by the railroad shall be consistent for each of the railroad’s reporting establishments. Railroads may list additional information in the alternative record beyond the information required on the Initial Rail Equipment Accident/Incident Record.

Where there are joint operations, each railroad involved must contact all parties involved to determine the extent of the damages for determining reportability. If the property of more than one railroad is involved in an accident/incident, the reporting threshold is calculated by including the damages suffered by all of the railroads involved. When total reportable damage to all railroads directly involved in an accident/incident exceeds the reporting threshold, the railroad must make a report even though its damages were below the threshold.

Any railroad indicating the involvement of another railroad in the accident on its Initial Rail Equipment Accident/Incident Record must promptly notify the other carrier (FRA may be contacted to obtain telephone numbers) and exchange information concerning the accident and obtain the other carriers’ reportable damage.

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The alternative record shall contain, at a minimum, the following information:

1. Date and time of accident;
2. Reporting railroad, and accident/incident number;
3. Other railroad, if applicable, and other railroad's accident/incident number;
4. Railroad responsible for track maintenance, and that railroad's incident number;
5. The classification of a rail equipment accident/incident by type is determined by the first event in the accident/incident sequence. For example, if, following a derailment, a derailed car or locomotive strikes a consist on an adjacent track, the accident/incident would be classified as a derailment, not a collision or other impact. The valid classification of accidents/incidents are as follows:

Derailment	Highway-rail crossing collision
Head-on collision	Railroad grade crossing collision
Rear-end collision	Obstruction
Side collision	Explosion-detonation
Raking collision	Fire/violent rupture
Broken train collision	Other impacts
	Other (describe in narrative);
6. Number of cars carrying hazardous materials that derailed or were damaged, and number of cars carrying hazardous materials that released product;
7. Subdivision:

The full name of the subdivision on which the accident occurred, i.e. the track owner's subdivision name. If the railroad is not so divided, enter the word "system." In the event of a joint accident involving Amtrak, the host railroad's subdivision will apply.

Note: If the accident occurred in a major terminal and subdivision is not applicable, enter "Terminal/Yard Name;"
8. Nearest city or town;
9. County (added in 2003);
10. State;
11. Milepost (to the nearest tenth);
12. Specific site;
13. Speed (indicate if actual or estimate);



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14. Train number or job number;
15. Type of equipment (freight, passenger, yard switching, etc.);
16. Type of track (main, yard, siding, industry);
17. Total number of locomotives in train;
18. Total number of locomotives that derailed;
19. Total number of cars in train;
20. Total number of cars that derailed;
21. Total amount of damage in dollars to equipment for this accident/incident based on computations as described in this Guide:

Enter the total amount of damage to all of the consists involved in this accident/incident, and if there are other railroads involved in this accident/incident that have equipment damages, add this to the total.

Then, in the narrative provide a break down of the damages by each railroad.

Note: For railroads that are using the AIRG software application to maintain their accident/incident data, AIRG will be modified to accept both sets of information (i.e., the total amount of damage to the railroad's equipment, and the total amount of damage to the railroad's equipment added to all other of the railroad's equipment damage);

22. Total amount of damage in dollars to track, signal, way, and structures based on computations as described in this Guide;  
  
Enter the total amount of damage in dollars to the track, signal, way, and structures for the accident/incident. If another railroad is responsible for maintaining the track on which the accident/incident occurred, contact this carrier to obtain the cost of damages to the track, signals, roadbed, track structures, etc., then keep this amount for the Initial Rail Equipment Accident/Incident Record;
23. Primary cause. Enter into this field the most applicable cause code that describes the cause of the accident from Appendix C, "Train Accident Cause Codes." The instructions for entry into this field are the same as for Item 38 of FRA Form F 6180.54, as shown in Chapter 7;
24. Contributing cause. Enter into this field the most applicable cause code that describes the contributing cause of the accident from Appendix C, "Train Accident Cause Codes." The instructions for entry into this field are the same as for Item 39 of FRA Form F 6180.54, as shown in Chapter 7;
25. Number of persons injured and persons killed, broken down into the following classifications: worker on duty—railroad employee, railroad employee not on duty, passenger on train, nontrespasser—on railroad property, trespasser, worker

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- on duty—contractor, contractor—other, worker on duty—volunteer, volunteer—other, and nontrespasser—off railroad property;
26. Narrative description of the accident:
- Enter a description of the accident, including a list of the breakdown of the equipment damages incurred by each railroad for the accident/incident, and specify which consist this specific Initial Rail Equipment Accident/Incident Record is for. The breakdown is as follows:
- Railroad (Enter Code) - Each consist equipment damages (e.g., Consist A equipment damage, Consist B equipment damage, etc.), and all other railroads (Enter Codes) and their equipment damages.
27. Whether the accident/incident was reported to FRA; If the rail equipment accident/incident exceeds the current threshold limit and a Form FRA F 6180.54 is being submitted, specify "Yes". For highway-rail grade crossing accidents/incidents (which are always reportable), and other non-reportable rail equipment accidents/incidents, specify "No"; however, if a highway-rail grade crossing accident/incident's damages exceed the current threshold, then specify "Yes"
28. Preparer's name, title, telephone number with area code, and signature; and
29. Date the record was initially signed/completed.

Each railroad shall enter each reportable and accountable rail equipment accident/incident on the appropriate record as early as practicable, but no later than 7 working days after receiving information or acquiring knowledge that a rail equipment accident/incident has occurred. See § 225.25(f).

The records described above may be maintained at the local establishment or, alternatively, at a centralized location. If the records are maintained at a centralized location, but not through electronic means, then a paper copy of the records that is current within 35 days of the month to which it applies shall be available for that establishment. If the records are maintained at a centralized location through electronic means, then the records for that establishment shall be available for review in a hard-copy format within 4-business hours of FRA's request. FRA recognizes that circumstances outside the railroad's control may preclude it from fulfilling the 4 business-hour time limit. In these circumstances, FRA will not assess a monetary penalty against the railroad for its failure to provide the requested documentation, provided the railroad makes a reasonable effort to correct the problem. See § 225.25(g).

Do not submit this form or an alternate railroad-designed record. If an incident is determined to be reportable, it must be recorded on Form FRA F 6180.54 and must be included with the reports filed for that month. If there are any reportable casualties, they must be reported on Form FRA

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F 6180.55a. Once a determination has been made that the rail equipment accident/incident has become reportable, any further updating should be done on the Form FRA F 6180.54, and you need not update Form FRA F 6180.97; however, you should go back and check off "Yes" for item 32 (or equivalent item on alternative railroad-designed record) of Form FRA F 6180.97 "Was this accident reported to FRA?".

It is important to note that the "Case/Incident Number" identified in block 4 must be used on Form FRA F 6180.54 and/or Form FRA F 6180.57 for any case determined to be reportable.

### 5.2 Questions and Answers

**Q1. A coupler broke during a switching operation, and the cars behind the broken coupler hit the train it separated from. Would this event mean that the railroad should complete the Initial Rail Equipment Accident/Incident Record?**

A1. This event would qualify as a broken train collision. The Rail Equipment Accident/Incident Record, Form FRA F 6180.97, must be completed. If the reportable damages exceed the annual reporting threshold, then Rail Equipment Accident/Incident Record Form FRA F 6180.54 must be completed and submitted to FRA.

**Q2. A railroad track inspector found a rail defect that needed immediate attention during a routine inspection. The section of track that was closed caused some disruption of service. Would this event qualify for the Initial Rail Equipment Accident/Incident Record?**

A2. If there was no derailment, collision, obstruction, etc. to rail equipment; then this emergency maintenance would not qualify for the Initial Rail Equipment Accident/Incident Record.

**Q3. Our switch crew had a minor derailment involving one set of wheels of one car. Would this event qualify for the Initial Rail Equipment Accident/Incident Record?**

A3. This event would qualify as a derailment. The Initial Rail Equipment Accident/Incident Record, Form FRA F 6180.97, must be completed. If the reportable damages exceed the annual reporting threshold, then the Rail Equipment Accident/Incident Report Form FRA F 6180.54 must be completed and submitted to FRA.

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**Q4. What about highway-rail grade crossing accidents? Would these events qualify for the Initial Rail Equipment Accident/Incident Record?**

A4. Yes, all highway-rail grade crossing accidents/incidents must be reported to FRA on Form FRA F 6180.57, and are also accountable rail equipment accidents/incidents, thus the Initial Rail Equipment Accident/Incident Record, Form FRA F 6180.97, must be completed. If the reportable damages exceed the annual reporting threshold, then the Rail Equipment Accident/Incident Report Form FRA F 6180.54 must be completed and submitted to FRA.

**Q5. Our mechanical department personnel reported that they fixed a broken trainline bracket on a box car. It appears that the bracket broke because of normal wear and tear, and was not the result of an accident. Would events like this qualify for an Initial Rail Equipment Accident/Incident Record?**

A5. No, if there is no evidence of an accident/incident, e.g., collision, derailment, fire, explosion/detonation, obstruction incident, other impact, etc., and the damage resulted from normal wear and tear, then an Initial Rail Equipment Accident/Incident Record, Form FRA F 6180.97, is not required.

**6. Form FRA F 6180.55a - Railroad Injury and Illness Summary  
(Continuation Sheet)**

**6.1 Requirement**

As set forth in § 225.11 and § 225.19(d), each death, injury, or occupational illness that is a new case and meets the general reporting criteria listed in paragraphs (d)(1) through (d)(6) of this section shall be reported to FRA on Form FRA F 6180.55a, Railroad Injury and Illness Summary (Continuation Sheet) if an event or exposure arising from the operation of a railroad is a discernable cause of the resulting condition or a discernable cause of a significant aggravation to a pre-existing injury or illness. The event or exposure arising from the operation of a railroad need only be one of the discernable causes; it need not be the sole or predominant cause. A new case that meets the general reporting criteria is presumed reportable if an event or exposure arising from the operation of a railroad is a contributing factor to the injury, illness, or significant aggravation of a pre-existing condition. If it is not obvious whether the precipitating event or exposure arose from the operation of a railroad or elsewhere, the railroad must evaluate the circumstances surrounding the injury or illness (e.g., work duties, environment, etc.) to decide whether it is more likely than not that one or more events or exposures arising from the operation of a railroad contributed to the resulting condition or significantly aggravated a pre-existing condition. The general injury/illness reporting criteria are as follows:

- (1) Death to any person;
- (2) Injury to any person that results in:
  - (i) Medical treatment;
  - (ii) Significant injury diagnosed by a physician or other licensed health care professional even if it does not result in death, a day away from work, restricted work activity or job transfer, medical treatment, or loss of consciousness; or
  - (iii) Loss of consciousness;
- (3) Injury to a railroad employee that results in:
  - (i) A day away from work; or
  - (ii) Restricted work activity or job transfer;
- (4) Occupational illness of a railroad employee that results in:
  - (i) A day away from work;
  - (ii) Restricted work activity or job transfer;
  - (iii) Loss of consciousness; or
  - (iv) Medical treatment;
- (5) Significant illness of a railroad employee diagnosed by a physician or other licensed health care professional even if it does not result in death, a day away from work, restricted work activity or job transfer, medical treatment, or loss of consciousness;
- (6) Illness or injury that:
  - (i) Meets the application of any of the following specific case criteria:
    - (A) Needlestick or sharps injury to a railroad employee;

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- (B) Medical removal of a railroad employee;
  - (C) Occupational hearing loss of a railroad employee;
  - (D) Occupational tuberculosis of a railroad employee;
  - (E) Musculoskeletal disorder of a railroad employee if this disorder is reportable under one or more of the general reporting criteria; or
- (ii) Is a covered data case.

### 6.2 Reporting Exceptions

In accordance with § 225.15(a), the following accidents/incidents are not reportable:

(a) Persons other than railroad employees. A railroad is not to report injuries that occur at highway-rail grade crossings that do not involve the presence or operation of on-track equipment, or the presence of railroad employees then engaged in the operation of a railroad;

(b) Employees on Duty. A railroad is not to report the following injuries to or illnesses of a railroad employee as Class A – Worker on Duty – Employee, if any of the following conditions in paragraphs (b)(1) through (b)(3) of this section are met. This exception does not affect a railroad’s obligation to report injuries to an employee not on duty (Class B – Employee not on Duty), or a railroad’s obligation to maintain a “Railroad Employee Injury/Illness Record” (Form FRA F 6180.98 or alternative railroad-designed form).

(1) The injury or illness occurred in or about living quarters not arising from the operation of a railroad;

(2) At the time of the injury or illness, the employee was present in the work environment as a member of the general public rather than as an employee; or

(3) 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.

(c) Employees on or off Duty. A railroad is not to report the following injuries to or illnesses of a railroad employee, Class A – Worker on Duty – Employee or Class B - Employee not on Duty, if any of the following conditions in paragraphs (c)(1) through (c)(7) of this section are met.

(1) The injury or illness involves signs or symptoms that surface at work but result solely from a non-work-related event or exposure that occurs outside the work environment;

(2) 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 vaccination shot, exercise class, racquetball, or baseball;

(3) The injury or illness is solely the result of an employee eating, drinking, or preparing food or drink for personal consumption. Note: However, 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 reportable if the case meets the general reporting criteria set forth at §225.19(d)(1)-(d)(6), and reported as either an Class A – Worker on Duty – Employee or Class B - Employee not on Duty depending on the employee's duty status;

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(4) 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;

(5) The injury or illness is solely the result of personal grooming, self medication for a non-work-related condition, or is intentionally self-inflicted;

(6) The illness is the common cold or flu (Note: contagious diseases such as tuberculosis, brucellosis, hepatitis A, or plague are considered work-related if the employee is infected at work); or

(7) 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.

(d) Contractors and volunteers. A railroad is not to report injuries to contractors and volunteers that are listed in paragraphs (b) and (c) of this section. For purposes of this paragraph only, an exception listed in paragraphs (b) and (c) referencing “work environment” is construed to mean for contractors and volunteers only, on property owned, leased, or maintained by the railroad for railroad operations.

(e) Rail equipment accident/incidents. A railroad is not to report the following rail equipment accidents/incidents:

(1) Cars derailed on industry tracks by non-railroad employees or non-railroad employee vandalism, providing there is no involvement of railroad employees; and

(2) Damage to out of service cars resulting from high water or flooding (e.g., empties placed on a storage or repair track). This exception does not apply if such cars are placed into a moving consist and as a result of this damage a reportable rail equipment accident results.

### **6.3 Suicide Data**

Suicides and attempted suicides are no longer exceptions to FRA’s reporting requirements and must be reported to FRA as “suicide data” on Form FRA 6180.55a.

*Suicide data* is data regarding the death of an individual due to that individual’s commission of suicide as determined by a coroner or other public authority; or injury to an individual due to that individual’s attempted commission of suicide as determined by a public authority. Only the death of or injury to the individual who committed the suicidal act is considered to be suicide data.

If the impact between the railroad on-track equipment and a highway user occurred because the highway user committed or attempted to commit suicide (as determined by a coroner or other public official), the death of or injury to that highway user must be reported to FRA.

Railroads must report suicide data on Forms FRA F 6180.55a, FRA F 6180.54 and FRA F 6180.57 as follows:

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1. Form FRA F 6180.55a—Place an “X” representative of “suicide or attempted suicide” in block 5r.
2. Form FRA F 6180.54—Place the following Miscellaneous Cause Codes, as applicable, in block 38: (a) Code M309 “Suicide (Highway-Rail Grade Crossing Accident)”; (b) Code M310 “Attempted Suicide (Highway-Rail Grade Crossing Accident)”; (c) Code M509 “Suicide (Other Misc.)”; and (d) Code M510 “Attempted Suicide (Other Misc.)” These codes can be found in Appendix C, “Train Accident Cause Codes” of this Guide.
3. Form FRA F 6180.57—Mark in block 41, “Driver Action,” the selection for “Suicide or Attempted Suicide.” Include the suicides and attempted suicides in the casualty counts in boxes 46, 49, and 52, as applicable.

FRA will maintain suicide data in a database that is not publically accessible. FRA will not include suicide data (as defined in § 225.5) in its periodic summaries of data on the number injuries and illnesses associated with railroad operations. See §225.41, Suicide Data. Suicide data will not be available on FRA's website for individual reports or downloads. Suicide data will, however, be available to the public in aggregate format on FRA's website and via requests under the Freedom of Information Act (FOIA). For additional information on FOIA requests, see FRA's web site at <http://www.fra.dot.gov/us/foia>. FRA will not report suicide data to OSHA.

### 6.4 Covered Data

**Covered data** is information that must be reported to FRA so that FRA’s reporting requirements remain consistent with OSHA. Covered data concerns railroad employee injuries or illnesses that are reportable exclusively because a physician or other licensed health care professional:

1. Recommends in writing that:
  - a. The employee take 1 or more days away from work when the employee instead reports to work (or would have reported had he or she been scheduled) and takes no days away from work in connection with the injury or illness and returns to full duty (no restricted days);
  - b. The employee work restricted duty for 1 or more days when the employee instead works unrestricted (or would have worked unrestricted had he or she been scheduled) and takes no days of restricted work activity in connection with the injury or illness; or
  - c. The employee take over-the-counter medication at a dosage equal to or greater than the minimum prescription strength, whether or not the employee actually takes the medication; or



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2. Makes a one-time topical application of a prescription-strength medication to the employee's injury.

Although "covered data" cases will be retained in the files, and will be accessible on FRA's web site, these cases will not be included in the casualty counts found in FRA's regular publications, e.g., Annual Report of Railroad Safety Statistics.

### 6.5 Employee On Duty Injury/Illness Reporting

*Basic Requirement. See Chapter 6.1 of this Guide. See also § 225.11 and § 225.19(d),*

#### 6.5.1 Questions and Answers on Employee on Duty Injury/Illness Reporting

**Q1. What if the injury was caused by the employee's own negligence or was a result of events beyond the railroad's control, e.g., an employee was assaulted by a trespasser, or two employees were engaged in horseplay. Would this make a difference in terms of whether the injury or illness must be reported?**

A1. No. Responsibility or fault is not a consideration when deciding whether or not to report. FRA notes that many circumstances that lead to a reportable work-related injury or illness are "beyond the employer's control," at least as that phrase is commonly interpreted. Nevertheless, because such an injury or illness was caused, contributed to, or significantly aggravated by an event or exposure at work, it must be reported (assuming that it meets one or more of the reporting criteria and does not qualify for a reporting exception under § 225.15. This approach is consistent with the no-fault reporting system FRA has adopted, which includes work-related injuries and illnesses, regardless of the level of employer control involved.

The following do not affect reportability if there is evidence an employee was injured or made ill while in the work environment:

1. The event or exposure was not witnessed.
2. The employee did not immediately notify a supervisor.
3. The employee did not require medical treatment at the time of the condition.
4. The condition was the result of an employee's error.
5. The condition was caused by outside factors. E.g., assault on an employee, an insect or animal bite, lightning strike, other act of nature.

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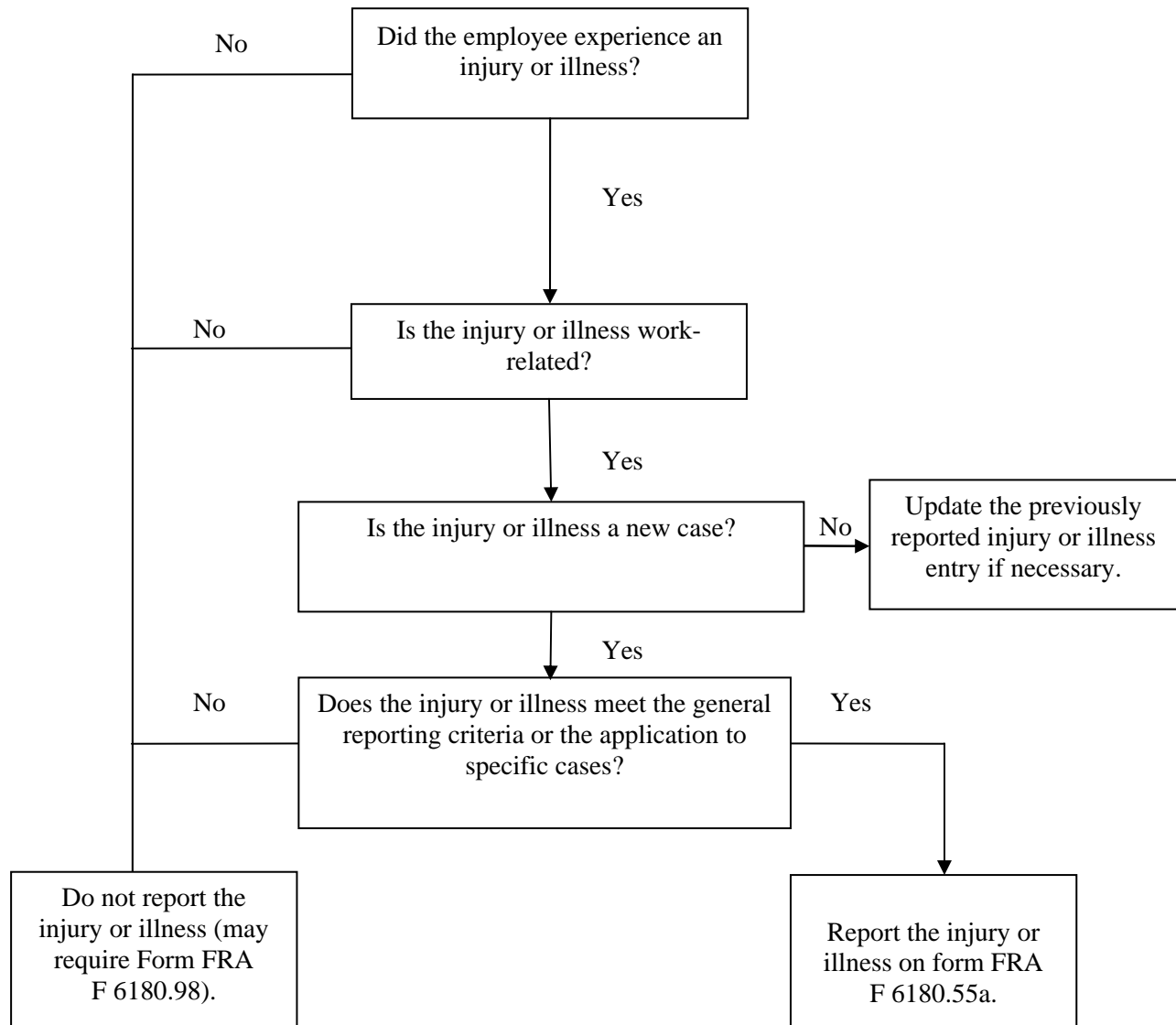
6. The condition did not meet all the necessary conditions for reporting at the time of the initial event, activity, or exposure.
7. The condition was the culmination of a series of activities.
8. The employee cannot specifically identify when or how he or she was injured.

**Q2. How do I decide whether a particular injury or illness of an employee on duty is reportable?**

- A2. The following decision tree shows the basic steps involved in making this determination:

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### 6.6 Determination of Work-Relatedness

You must consider an injury or illness to be work-related if an event or exposure in the work environment discernably caused or contributed to the resulting condition, or if an event or exposure occurring in the work environment is a discernable cause of a significant aggravation to a pre-existing injury or illness. The work event or exposure need only be one of the causes of, or contributors to, the resulting injury or illness; it need not be the sole or predominant cause or contributor. Work-relatedness is presumed for injuries and illnesses resulting from events or exposures occurring in the work environment, even if the injury or illness does not have a clear connection to a specific work activity.

Injuries and illnesses that occur at work may not have a clear connection to a specific work activity, condition, or substance that is peculiar to the employment environment. For example, an employee may trip for no apparent reason while walking across a level factory floor; be sexually assaulted by a co-worker; or be injured accidentally as a result of an act of violence perpetrated by one co-worker against a third party. In these and similar cases, the employee's job-related tasks or exposures did not create or contribute to the risk that such an injury would occur. Nevertheless, these cases are work-related. The causal connection is established by the fact that the injury would not have occurred but for the conditions and obligations of employment that placed the employee in the position in which he or she was injured or made ill.

An injury or illness is not reportable if the injury or illness involves signs or symptoms that manifest themselves at work but result solely from a non-work-related event or exposure that occurs outside the work environment. See reporting exceptions listed at § 225.15.

If it is not obvious whether the precipitating event or exposure that caused or contributed to an injury or illness occurred in the work environment or elsewhere, the employer must evaluate the employee's work duties and environment to decide whether or not one or more events or exposures in the work environment caused or contributed to the resulting condition or significantly aggravated a pre-existing condition. So long as the event or exposure occurred at work and is a discernable cause of the injury or illness, the injury or illness is work-related. If an injury is within the presumption of work-relatedness, the employer can rebut work-relatedness only by showing that the case falls within an exception listed in § 225.15. This means that the employer must make a determination whether it is more likely than not that work events or exposures were a discernable cause of the injury or illness, or a discernable cause of a significant aggravation to a pre-existing condition. The evaluation might include consultation with an ergonomics expert as well as a PLHCP. A review of the job description alone is not sufficient without reviewing all of the employee's collateral duties. If the employer decides the case is not work-related, and FRA subsequently issues a citation for failure to report, the Government would have the burden of proving that the injury or illness was work-related.

### 6.6.1 Interpretations on Work-Relatedness

#### Scenario 1:

An employer asks if an injury or illness sustained by an on-duty employee while he or she is engaged in an activity such as walking or bending is considered work-related. The employer notes that a case is presumed to be work-related if an event or exposure in the work environment discernably caused or contributed to the injury or illness. The work event or exposure need only be one of the causes or contributions to the injury or illness; it need not be the sole or predominant cause.

#### Response 1:

The question employers must answer is whether there is an identifiable event or exposure that occurred in the work environment and resulted in the injury or illness. Thus, if an employee trips while walking across a level shop floor, the resulting injury is considered work-related because the precipitating event—the tripping accident—occurred in the workplace. The case is work-related even if the employer cannot determine why the employee tripped, or whether any particular workplace hazard caused the accident to occur.

The activity engaged in by the employee at the time of the injury—walking—is an “event” that would trigger application of the presumption. Other examples of events include sneezing, climbing, tripping, and bending down. In the absence of evidence to overcome the presumption, the injury is work-related. Thus, in the absence of evidence to overcome the presumption, an ankle injury caused by a trip that occurred while the employee was walking down a level seamless hallway at work is work-related, regardless of whether the accident is attributable to a defect in the hall. By the same reasoning, if the activity of walking down a hallway caused the employee’s knee to buckle or to sprain the ankle, the injury is work-related. If an injury or illness did not result from an identifiable event or exposure in the work environment, but only manifested itself during work, the injury is not work-related. For example, if the employee had a non-occupational event or exposure, and there is no evidence of a work-related event or exposure that caused or contributed to the injury or illness, the injury should not be reported.

There is also the issue of whether the determination of work-relatedness is affected by an employee's pre-existing condition. For reporting purposes, a pre-existing condition is an injury or illness resulting solely from a non-work-related event or exposure. If an employee’s pre-existing condition is worsened as a result of an event or exposure at work, the case is work-related if the work event or exposure “significantly aggravated” the pre-existing condition (i.e., discernably caused the case to meet any of the general criteria). If an employee with a previous work-related injury to a body part suffers a subsequent work-related injury of the same type to the same body part, the subsequent injury is reportable (assuming the general reporting criteria are met) if it is a “new case” as described in this chapter. If the subsequent injury is not a “new

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case" then the railroad is required to update the previously submitted injury or illness report if necessary.

### Scenario 2:

An employee reported to work at 7:00 a.m. At 12:15 p.m., the employee reported that his toes on his left foot started swelling and his foot started hurting. The employee wanted to go to a doctor for evaluation.

On the First Report of Injury that the employee completed before he went to the doctor, the employee indicated that the cause of the illness was "unknown."

When answering the doctor's question: "How did injury occur?" the employee answered that the only thing he could think of was that his feet were wet all the previous day due to work in the morning at a cooling tower. The cooling tower water is treated to remove bacteria and then used in process operations in the plant.

The doctor described the illness/injury as foot edema/cellulitis. The doctor also diagnosed the injury as an occupational disease, prescribed an antibiotic, and the employee missed 1 day of work. The company sent the employee to a second doctor who said to continue using the antibiotic. Neither doctor could state conclusively that the foot edema/cellulitis was or was not due to the employee's feet being wet due to work at the cooling tower. Neither doctor is a specialist in skin disorders.

During an incident review at the site, the employee again said he did not know if his feet being wet all day the previous day caused the injury/illness. The employee also stated that he had not worn the personal protective equipment, rubber boots, prescribed for this task.

The company determined that this injury/illness was not work-related (did not occur in the course of or as a result of employment), since neither physician nor the employee could state with certainty that the injury/illness was caused by the employee's feet being wet all day due to work at the cooling tower. Since the injury/illness was determined to not be work-related, the company deemed the incident non-reportable.

### Response 2:

A case is work-related *if it is more likely than not* that an event or exposure in the work environment was a cause of the injury or illness. The work event or exposure need only be one of the causes; it not need to be the sole or predominant cause. In this case, the fact that neither the physician nor the employee could state with certainty that the employee's edema was caused by working with wet feet is not dispositive. The physician's description of the edema as an "occupational disease," and the employee's statement that working with wet feet was "the only

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thing he could of” as the cause, indicate that it is more likely than not that working with wet feet was a cause. The case must be recorded on the Railroad Employee Injury and/or Illness Record, Form FRA F 6180.98, and reported to FRA on Form FRA F 6180.55a. The fact that the employee did not wear proper protective equipment is irrelevant for reporting purposes.

### **Scenario 3:**

An employee was to report to work by 8:00 a.m. The employee drove into the company parking lot at 7:30 a.m. and parked the car. The employee exited the car and proceeded to the office to report to work. The parking lot and sidewalks are privately owned by the facility and both are within the property line, but not the controlled access points (i.e., fence, guards). The employee stepped onto the sidewalk and slipped on the snow and ice. The employee suffered a back injury and missed multiple days of work. The company believes that the employee was still in the process of the commute to work since the employee had not yet checked in at the office. Since a work task was not being performed, the site personnel deemed the incident not work-related and therefore not reportable.

### **Response 3:**

Company parking lots and sidewalks are part of the employer’s establishment for injury/illness reporting purposes. In this case, the employee slipped on an icy sidewalk while walking to the office to report for work. In addition, the event or exposure that occurred does not meet any of the work-related exceptions. The employee was on the sidewalk because of work. The event or exposure occurred in the work environment and caused or contributed to the resultant injury. Therefore, the case is work-related, regardless of the fact that he had not actually checked in, and must be reported as a case involving a Railroad Employee Not On Duty (Class B).

### **Scenario 4:**

An employee reports to work. Several hours later, the employee goes outside for a “smoke break and to get a pair of sunglasses from his truck.” The employee slips on ice and injures his back.

Since the employee was not performing tasks related to the employee’s work, the company has deemed this incident non-work related and therefore not reportable.

### **Response 4:**

An injury or illness is not work-related if it 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. In order for this exception to apply, the case must meet both of the stated conditions. The exception does not apply here because the injury or illness occurred within normal working hours. Therefore, this case is work-related, and must be recorded on the Railroad Employee Injury and/or Illness Record, Form FRA F 6180.98, and reported on Form

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FRA F 6180.55a.

### **Scenario 5:**

An employee drove into the company parking lot at 7:30 a.m., exited his car, and proceeded to cross the parking lot to clock-in to work. A second employee, also on the way to work, approached the first employee, and the two individuals got into a physical altercation in the parking lot. The first employee broke an arm during the altercation. The employee went to the doctor and received medical treatment for his injury.

The company deemed this a non-work-related incident, and therefore non-reportable, since the employees had not yet reported to work and a work task was not being performed at the time of the altercation.

### **Response 5:**

The reporting requirements contain no general exception for purposes of determining work-relatedness for cases involving acts of violence in the work environment. Company parking lots/access roads are part of the employer's premises and therefore part of the employer's establishment. Whether the employee had not clocked in to work does not affect the outcome for determining work-relatedness. Therefore, this case is work-related and must be recorded on the Railroad Employee Injury and/or Illness Record, Form FRA F 6180.98, and reported on Form FRA F 6180.55a.

### **Scenario 6:**

An employee injured a knee performing work-related activities in 2005. The accident was FRA reportable. The employee had arthroscopic knee surgery 11 months later and was released to full duty a month and a half after the arthroscopic surgery.

The employee had a second knee injury 3 months after the return to work release (after the first surgery). After the second surgery, the doctor prescribed Vioxx<sup>®</sup> as an anti-inflammatory drug.

Approximately 1½ months after the second knee surgery, the employee was given another full release to return to work full duty and returned to work. However, the doctor told the employee to continue to take Vioxx<sup>®</sup> as prescribed (as needed) and to return to the doctor as needed. The employee scheduled a followup appointment with the doctor. The day before the appointment, the employee bumped his knee at work. During his scheduled doctor's appointment (which was to be the last followup visit), the employee mentioned the latest incident (bumping the knee) to the doctor and showed him where the pain was occurring due to bumping his knee. The doctor stated that the employee had an inflamed tendon (Grade 1 lateral collateral ligament sprain) that was not part of the initial surgery (patellar tendonitis). The doctor stated in the diagnosis that the original injury that required knee surgery was resolved. The doctor told the employee to



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continue taking Vioxx<sup>®</sup> for the inflamed tendon. Since the employee was already taking the medication prescribed (Vioxx<sup>®</sup>), the railroad does not believe this is reportable as a second incident.

### **Response 6:**

In the accident/incident regulation and reporting guidelines, the employer is required to follow any determination a physician or other licensed health care professional has made about the status of a new case. The inflamed tendon is a new case because the employee had completely recovered from the previous injury and illness and a new event or exposure had occurred in the work environment. The case must be recorded on the Railroad Employee Injury and/or Illness Record, Form FRA F 6180.98, and reported on Form FRA F 6180.55a.

### **Scenario 7:**

An employee knits a sweater for her daughter during a lunch break. She lacerates her hand and needed sutures. She is engaged in a personal task. Are lunch breaks or other breaks considered “assigned working hours?” Is the case reportable?

### **Response 7:**

This case must be reported because it does not meet the exception to work-relatedness for injuries that occur in the work environment but are solely due to personal tasks. For the “personal tasks” exception to apply, the injury or illness must: 1) be solely the result of the employee doing personal tasks (unrelated to their employment) and 2) occur outside of the employee’s assigned working hours. The exception does not apply to injuries and illnesses that occur during breaks in the normal work schedule. Here, the exception does not apply because the injury occurred during the employee’s lunch break.

### **Scenario 8:**

Does an employee become a part of the general public once they have timed out? Or are they considered part of the work force from the time they get out of their car coming in to work to the time they step into their car to go home at the end of their work day?

### **Response 8:**

For purposes of FRA recordkeeping, injuries and illnesses occurring in the work environment are considered work-related. Punching in and out with a time clock (or signing in and out) does not affect the outcome for determining work-relatedness. If the employee experienced a work-related injury or illness that meets the requirement for recording on a Form FRA F 6180.98 record, then the paperwork must be retained on file. If it satisfies one or more of the general reporting criteria, it must be reported on Form FRA F 6180.55a. The only distinction is whether

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or not to report as a Railroad Employee On Duty (Class A) or Railroad Employee Not On Duty (Class B).

### Scenario 9:

An employee times out and chooses to linger in the plant, then she goes to her locker to lock up her personal items and falls. Is the injury work-related?

### Response 9:

Since the resultant injury occurred in the work environment, it is work-related, unless a specific exception applies. There are not enough factual details provided in the scenario for FRA to fully evaluate whether an exception under 225.15 applies in the circumstances described. However, if employees normally keep personal items in a locker at the plant, FRA would not consider the employee's actions in going to his locker before leaving the plant to be a personal task, unrelated to employment, for purposes of the exception.

### 6.6.2 Questions and Answers on Employees—Determination of Work-Relatedness

- Q3. Are there situations in which an injury or illness occurs to an employee while in the work environment, but would not be reported as an injury to, or illness of, an employee on duty?**
- A3. Yes. An injury or illness occurring in the work environment that falls under one of the reporting exceptions set forth at § 225.15, would not be reported as one to an employee on duty. These situations must be evaluated to determine if the employee's condition is reportable using the criteria for individuals who are not employees on duty, e.g., employee not on duty, nontrespasser.
- Q4. What activities are considered “personal grooming” for purposes of the exception to the geographic presumption of work-relatedness for employees on duty?**
- A4. Personal grooming activities are activities directly related to personal hygiene, such as combing and drying hair, brushing teeth, clipping fingernails, and the like. Bathing or showering at the workplace when necessary because of an exposure to a substance at work is not within the personal grooming exception. Thus, if an employee slips and falls while showering at work to remove a contaminant to which he has been exposed at work, and sustains an injury that meets one of the general reporting criteria, the case is reportable.
- Q5. What are “personal tasks” for purposes of the reporting exception under §225.15?**

A5. “Personal tasks” are tasks that are unrelated to the employee’s job. For example, if an employee uses a company break to perform work on his or her personal automobile that is not part of his or her job duties, he or she is engaged in a personal task. Note that a case is reportable unless it meets both prongs of the exception under 225.15: the case must involve first, personal tasks at the establishment; and second, must have occurred outside of the employee’s assigned working hours. See Q7 and A7, below.

**Q6. If an employee stays at work after normal work hours to prepare for the next day’s tasks and is injured, is the worker considered to be an employee on duty? For example, if an employee stays after work to prepare equipment and is injured, is the case work-related?**

A6. Yes. This individual is considered to be “on duty.” A case is work-related any time an event or exposure in the work environment either causes or contributes to an injury or illness or significantly aggravates a pre-existing injury or illness, unless one of the specific exceptions in this section applies. The work environment includes the establishment and other locations where one or more employees are working or are present as a condition of their employment. The case in question would be work-related if the employee was injured as a result of an event or exposure at work, regardless of whether the injury occurred after normal work hours and regardless of whether the employee was in pay status.

**Q7. An employee was injured in the workplace while performing a personal task (unrelated to their employment) outside of the employee’s assigned working hours; is the injury reportable?**

A7. In order to correctly apply the reporting exception, the case must meet both of the following conditions. The case must involve first, personal tasks at the establishment; and second, must have occurred outside of the employee’s assigned working hours. In this case, the conditions are met. Thus, this case would not be reportable as an injury to a Railroad Employee On Duty (Class A). However, because the employee is on the work premises, the injury must be reported to FRA as a “Railroad Employee Not On Duty (Class B).”

**Q8. How do I handle a case if it is not obvious whether the precipitating event or exposure occurred in the work environment or occurred away from work?**

A8. You must evaluate the employee’s work duties and environment to decide whether it is more likely than not that one or more events or exposures in the work environment either caused or contributed to the resulting condition or significantly aggravated a pre-existing condition. The evaluation might include

consultation with an ergonomics expert as well as a PLHCP. A review of the job description alone is not sufficient without reviewing all of the employee's collateral duties.

**Q9. How do I know if an event or exposure in the work environment “significantly aggravated” a pre-existing injury or illness?**

A9. A pre-existing injury or illness has been significantly aggravated, for purposes of FRA injury and illness recordkeeping, when:

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

**Q10. Which injuries and illnesses are considered pre-existing conditions?**

A10. An injury or illness is a pre-existing condition if it resulted solely from a non-work-related event or exposure that occurred outside the work environment, e.g., diabetes.

**Q11. An employee-on-duty was injured at work and received medical treatment. The employee was also tested for alcohol and drugs. The test was positive for alcohol. The employee admitted that he had been previously treated for alcohol abuse. An investigation determined that this event or exposure would not have occurred except for the alcohol impairment. Since the employee already had an existing problem with alcohol abuse, would this injury meet the reporting exception that the injury or illness involves signs or symptoms that manifest themselves at work but result solely from a non-work-related event or exposure that occurs outside the work environment?**

A11. The positive drug/alcohol history is not a qualifying reporting exception. There are some medical conditions, such as epilepsy, that can not be controlled by the

employee. The Americans with Disabilities Act, Public Law 101-336, prohibits discrimination on the basis of epilepsy in employment. That is why OSHA has excluded injuries occurring as a result of epilepsy from injury reporting with the revised regulation, if the workplace environment did not trigger the epileptic seizure. This exception allows the employer to exclude cases where a loss of consciousness is due solely to a personal health condition, such as epilepsy, diabetes, or narcolepsy.

This concept cannot be extended to alcohol dependency or the use of legal or illegal drugs. Impairment by drugs or alcohol is a serious problem in the workplace; however, it is not classified as a pre-existing condition for purposes of reporting injuries. The employer is expected to keep the workplace drug-free and to report all injuries that meet FRA's reporting criteria, including those that are associated with a positive drug/alcohol test result.

**Q12. How do I decide whether an injury or illness is work-related if the employee is on travel status at the time the injury or illness occurs?**

A12. 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 of such activities 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 reported if they meet one of the exceptions listed below:

- (1) An employee checks into a hotel or motel for 1 or more days. When a traveling employee checks into a hotel, motel, or other temporary residence, he or she establishes a "home away from home." You must evaluate the employee's activities after he or she checks into the hotel, motel, or other temporary residence for their work-relatedness in the same manner as you evaluate the activities of a non-traveling employee. When the employee checks into the temporary residence, he or she is considered to have left the work environment. When the employee begins work each day, he or she re-enters the work environment. If the employee has established a "home away from home" 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.

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Note: An employee in deadhead transportation is considered an “employee on duty” regardless of the mode of transportation. Deadhead transportation occurs when an employee is traveling at the direction or authorization of the carrier to or from an assignment, or the employee is involved with a means of conveyance furnished by the carrier or compensated by the carrier.

Exception: If an employee is housed by the carrier in a facility such as a motel, and part of the service provided by the motel is the transportation of the employee to and from the work site, any reportable injury to the employee during such transit is to be reported as that to a Railroad Employee Not On Duty (Class B). Likewise, if the employee had decided upon other means of transportation that had not been authorized or provided, such as a ride from a friend, and for which he would not have been compensated by the railroad, the injury is not considered to be an on-duty injury.

(2) An employee takes a detour for personal reasons. 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).

**Q13. This question involves the following sequence of events: Employee A drives to work, parks her car in the company parking lot and is walking across the lot when she is struck by a car driven by employee B, who is commuting to work. Both employees are seriously injured in the accident. Is either worker considered to be an employee on duty?**

A13. Neither employee’s injuries are reportable as occurring to a Railroad Employee On Duty (Class A). While the employee parking lot is part of the work environment, injuries occurring there would be classified as injuries to Railroad Employees Not On Duty (Class B).

**Q14. How do I decide if a case is work-related when the employee is working at home or telecommuting from another location?**

A14. Injuries and illnesses that occur while an employee is working at home, including work in a home office, will be 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 rather than to the general home environment or setting. For example, if an employee drops a box of work documents and injures his or her foot, the case is

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considered work-related. If an employee is injured because he or she trips on the family dog while rushing to answer a work phone call, the case is not considered work-related. If an employee working at home is electrocuted because of faulty home wiring, the injury is not considered work-related.

**Q15. If an employee voluntarily takes work home and is injured while working at home, is the case reportable?**

A15. No. Injuries and illnesses occurring in the home environment are only considered work-related if the employee is being paid or compensated for working at home and the injury or illness is directly related to the performance of the work rather than to the general home environment.

### 6.7 Determination of New Cases

You must consider an injury or illness to be a “new case” if:

1. The employee has not previously experienced a reported injury or illness of the same type that affects the same part of the body; or
2. The employee previously experienced a reported 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
3. an event or exposure in the work environment discernably caused the signs or symptoms to reappear.

The following criteria are used for determining whether any injury or illness, including a musculoskeletal disorder, is to be treated as a new case or as the continuation of an “old” injury or illness. First, if the employee has never had a reported injury or illness of the same type and affecting the same part of the body, the case is automatically considered a new case and must be evaluated for reportability. This provision will handle the vast majority of injury and illness cases, which are new cases rather than recurrences or case continuations. Second, if the employee has previously had a reported injury or illness of the same type and affecting the same body part, but the employee has completely recovered from the previous injury or illness, and a new workplace event or exposure causes the injury or illness (or its signs or symptoms) to reappear, the case is a recurrence that the employer must evaluate for reportability.

#### 6.7.1 Questions and Answers on New Cases

**Q16. How is an employer to determine whether an employee has “recovered completely” from a previous injury or illness such that a later injury or illness of the same type affecting the same part of the body resulting from an event or exposure at work is a “new case?” If an employee’s signs and**

**symptoms disappear for a day and then resurface the next day, should the employer conclude that the later signs and symptoms represent a new case?**

- A16. An employee has “recovered completely” from a previous injury or illness, for purposes of this section, when he or she is fully healed or cured. The employer must use his best judgment based on factors such as the passage of time since the symptoms last occurred and the physical appearance of the affected part of the body. If the signs and symptoms of a previous injury disappear for a day only to reappear the following day, that is strong evidence the injury has not properly healed. The employer may, but is not required to, consult a physician or other licensed health care provider (PLHCP). Where the employer does consult a PLHCP to determine whether an employee has recovered completely from a prior injury or illness, it must follow the PLHCP’s recommendation. In the event the employer receives recommendations from two or more PLHCPs, the employer may decide which recommendation is the most authoritative and report the case based on that recommendation.
- Q17. When an employee experiences the signs or symptoms of a chronic work-related illness, do I need to consider each recurrence of signs or symptoms to be a new case?**
- A17. No. 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 reported once. Examples may include occupational cancer, asbestosis, byssinosis, and silicosis.
- Q18. 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, must I treat the episode as a new case?**
- A18. Yes. Since the episode or recurrence was caused by an event or exposure in the workplace, the incident must be treated as a new case.
- Q19. May I rely on a physician or other licensed health care professional to determine whether a case is a new case or a recurrence of an old case?**
- A19. You are not required to seek the advice of a physician or other licensed health care professional to determine whether a case is new or a recurrence of an old one. However, if you do seek such advice, you must follow the physician 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



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reasoned, or most persuasive), and report the case based upon that recommendation. If a subsequent physician determines that the condition does not exist or is not work-related following a review of the examining physician's tests, notes, diagnosis, etc., then it must be clearly documented why the subsequent physician's findings differ from the original physician.

### **6.8 General Reporting Criteria**

FRA's general reporting criteria for death, injury or occupational illness is set forth in Chapter 6.1 of this Guide.

#### **6.8.1 Questions and Answers on General Reporting Criteria**

##### **Q20. How do I decide if a case meets one or more of the general reporting criteria?**

A20. A work-related injury or illness must be reported if it results in one or more of the following:

1. Death.
2. Days away from work.
3. Restricted work or transfer to another job.
4. Medical treatment beyond first aid.
5. Loss of consciousness.
6. A significant injury or illness diagnosed by a physician or other licensed health care professional.

#### **6.8.2 Questions and Answers on Days Away from Work**

##### **Q21. How do I report a work-related injury or illness that results in day(s) away from work?**

A21. When an injury or illness involves 1 or more days away from work, you must report the injury or illness on Form FRA F 6180.55a and report the number of calendar days away from work in column 5o. (See definition of "day away from work" and the section on counting days away from work and days of restriction.) If the employee is out for an extended period of time, you must enter a best faith estimate of the day(s) that the employee will be away, and update the day count when the actual number of days is known.

##### **Q22. Do I count the day on which the injury occurred or the illness began?**

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A22. No. You begin counting days away from work on the day after the injury occurred or the illness began.

**Q23. How do I report an injury or illness when a physician or other licensed health care professional recommends that the worker stay at home, but the employee comes to work anyway?**

A23. You must report these injuries and illnesses on Form FRA F 6180.55a. If a physician or other licensed health care professional recommends days away, you should encourage your employee to follow that recommendation. However, a minimum of 1 day away from work must be reported when the injured or ill employee does not follow the physician or licensed health care professional's recommendation and returns to work. 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 report the case based upon that recommendation.

**Q24. How do I handle a case when a physician or other licensed health care professional recommends that the worker return to work, but the employee stays at home for a day anyway?**

A24. A decision by an employee concerning the care or treatment of his own condition is not to be considered when deciding to report. If an employee has an injury that meets none of the standard criteria for reporting, then an employee's action, e.g., taking over-the-counter medication at prescription strength without proper authorization, would not make the injury reportable even if he informed his employer that this level of dosage was used.

In the situation described, a report would not be made unless the day absent from work was approved by the employer as necessary for recovery from an otherwise reportable injury, e.g., prescription medication was recommended by a PLHCP. If the employee contacted the appropriate official in the company and this official authorized the time off because of the injury, then a day away from work is to be counted. Authorization may also come from a PLHCP, e.g., he sees his own physician the day after the injury and the employer is aware that the doctor recommends that the employee take time off to recover.

**Q25. An employee who sustained a work-related bruise on his knee was told by a physician not to return to work until undergoing an MRI. The employee remained off work for some days before the procedure could be performed. The MRI showed that no FRA reportable injury occurred. Since no injury occurred, should this case be reported to FRA?**

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A25. Results of an MRI do not negate the reportability of a physician's recommendation. The case is FRA reportable based on the physician's recommendation that the employee not return to work before undergoing an MRI for his bruised knee. Railroads are instructed on how to record days away cases when a physician or PLHCP recommends that the injured or ill worker stay at home or that he or she return to work but the employee chooses not to do so. FRA requires employers to follow the physician's or PLHCP's recommendation when reporting a case. For purposes of FRA recordkeeping, the case met the criteria for reporting because the employee had sustained a work-related injury—a bruised knee—involving 1 or more days away from work. The subsequent MRI results do not change these facts. Accordingly, the negative results from the MRI results do not change the fact that the employee was instructed not to return to work.

**Q26. If an employee who sustains a work-related injury requiring days away from work is terminated for drug use based on the results of a post-accident drug test, how is the case reported? May the employer stop the day count upon termination of the employee for drug use?**

**For another injury, it was later established during a hearing that the injury was the result of a rules violation on the part of the employee. The employee was terminated because of the rules violation. When do we discontinue the counting of days away from work?**

A26. The purpose of counting days away from work is to provide an additional measure of the severity of an injury. The employer may stop counting days away from work if an employee who is away from work because of an injury or illness leaves the company for some reason unrelated to the injury or illness, such as retirement or scheduled seasonal layoff. However, when the employer conducts a drug test based on the occurrence of an accident resulting in an injury at work and subsequently terminates the injured employee, the termination is related to the injury. The same is true for discipline involving suspension of duty for a rule violation that is imposed following an injury.

Therefore, you must estimate the number of days in cases such as these where the employee would have otherwise been away from work due to the injury, and enter that number on Form FRA F 6180.55a.

**Q27. Once I have reported a case involving days away from work, restricted work, or medical treatment and the employee has returned to his or her regular work or has received the course of recommended medical treatment, is it permissible for me to delete the case based on a company physician's**

**recommendation that the days away from work, work restriction or medical treatment were not necessary?**

A27. The initial decision about the need for days away from work, a work restriction, or medical treatment is based on the information available, including any recommendation by a physician or other licensed health care professional at the time the employee is examined or treated. At this time, if you receive contemporaneous recommendations from two or more physicians or other licensed health care professionals about the need for days away, a work restriction, or medical treatment, the employer may decide which recommendation is the most authoritative and report the case based on that recommendation. However, once the days away from work or work restriction has occurred or medical treatment has been given, the employer may not delete the case because of a later physician's conclusion that the days away, restriction or treatment was unnecessary.

**Q28. How long must a modification to a job last before it can be considered a permanent modification?**

A28. You may stop counting days of restricted work or transfer to another job if the restriction or transfer is made permanent. A permanent restriction or transfer is one that is expected to last for the remainder of the employee's career. Where the restriction or transfer is determined to be permanent at the time it is ordered, you must count at least 1 day of the restriction and enter "Y" for termination or permanent transfer on Form FRA F 6180.55a in block 5r. If the employee whose work is restricted or who is transferred to another job is expected to return to his or her former job duties at a later date, the restriction or transfer is considered temporary rather than permanent.

**Q29. If an employee loses his arm in a work-related accident and can never return to his job, how is the case reported? Is the day count capped at 180 days?**

A29. If an employee never returns to work following a work-related injury, the employer must enter an estimate of the number of days the employee would have required to recuperate from the injury, up to 180 days.

**Q30. How do I count weekends, holidays, or other days the employee would not have worked anyway?**

A30. 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 reported if the employee

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would not have been able to work on those days because of a work-related injury or illness.

**Q31. How do I report a case in which 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?**

A31. You need to report this case only 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 report the injury or illness as a case with days away from work or restricted work, and enter the day counts, as appropriate.

**Q32. How do I report a case in which 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?**

A32. You need to report a case of this type only 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 scheduled time off. If so, you must report the injury or illness as a case with days away from work or restricted work, and enter the day counts, as appropriate.

**Q33. Is there a limit to the number of days away from work I must count?**

A33. Yes. You may “cap” the total days away at 180 calendar days. 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 180 calendar days away from work and/or days of job transfer or restriction. In such a case, entering 180 in the total days away column will be considered adequate.

**Q34. May I stop counting days if an employee who is away from work because of an injury or illness retires or leaves my company?**

A34. Yes. 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 or days of restriction/job transfer. If the employee leaves your company because of the injury or illness, you must estimate the total number of days away or days of restriction/job transfer and enter the day count on Form FRA F 6180.55a.

**Q35. If a case occurs in one year but results in days away during the next calendar year, do I report the case in both years?**

- A35. No. You only report the injury or illness once. You must enter the number of calendar days away for the injury or illness on Form FRA F 6180.55a for the year in which the injury or illness occurred. If the employee is still away from work because of the injury or illness at the time you are doing your initial closing out of the calendar year (by April 15), you must provide a best faith estimate of the total number of calendar days you expect the employee to be away from work, and file a corrected copy of Form FRA F 6180.55a if the 180-day cap has not been reached.

### 6.9 Restricted Work

An employee's work is considered restricted when, as a result of a work related injury or illness, 1) a physician or other licensed health care professional recommends that the employee not perform one or more of the routine functions of his or her job (job functions that the employee regularly performs at least once per week), or not work the full workday that he or she would otherwise have been scheduled to work; or 2) the employer keeps the employee from performing one or more of the routine functions of his or her job, or from working the full workday that he or she would otherwise have been scheduled to work.

#### 6.9.1 Questions and Answers on Restricted Work

**Q36. How do I report a work-related injury or illness that results in restricted work or job transfer?**

- A36. When an injury or illness involves restriction of routine work functions as a described in (1) of the first paragraph of this section, the case is reportable as one resulting in restriction, and a count of restricted days must be maintained. If the injury or illness was not reportable under (1), but met any other reporting criteria, i.e., medical treatment, then any restricted days that result as described in (2) must be recorded, unless the count of these days is subject to other limitations, e.g., see Q42 & A42 in this section. You must report the number of qualifying restricted or transferred days in the restricted workdays column, 5p.

**Q37. How do I decide if the injury or illness resulted in restricted work?**

- A37. Restricted work occurs when, as the result of a work-related injury or illness:
1. You keep the employee from performing one or more of the routine functions of his or her job, or from working the full workday that he or she would otherwise have been scheduled to work; or
  2. A physician or other licensed health care professional recommends that the employee not perform one or more of the routine functions of his or

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her job, or not work the full workday that he or she would otherwise have been scheduled to work.

An employee's routine functions are those work activities the employee regularly performs at least once per week.

**Q38. An employee hurts his or her left arm and is told by the doctor not to use the left arm for a week. The employee is able to perform all of his or her routine job functions using only the right arm (though at a slower pace and the employee is never required to use both arms to perform his or her job functions). Would this be considered restricted work?**

A38. No. If the employee is able to perform all of his or her routine job functions (activities the employee regularly performs at least once per week), the case does not involve restricted work. Loss of productivity is not considered restricted work for FRA's reporting purposes.

**Q39. Do I have to report restricted work or job transfer if it applies only to the day on which the injury occurred or the illness began?**

A39. No. You do not have to report restricted work or job transfers if you, or the physician or other licensed health care professional, imposes the restriction or transfer only for the day on which the injury occurred or the illness began.

**Q40. If the railroad or a physician or other licensed health care professional recommends a work restriction, is the injury or illness automatically reportable as a "restricted work" case?**

A40. No. A recommended work restriction is reportable only if it affects one or more of the employee's routine job functions. To determine whether this is the case, the employer must evaluate the restriction in light of the routine functions of the injured or ill employee's job. If the restriction from you or the physician or other licensed health care professional keeps the employee from performing one or more of his or her 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 the employer must report the case. For example, if the PLHCP restricts the employee from lifting heavy objects, but the employee's job never requires the lifting of heavy objects, then there has been no restriction imposed that involves the employee's routine job functions. (An employee's routine functions are those work activities the employee regularly performs at least once per week.)

**Q41. What do I do if a physician or other licensed health care professional recommends a job restriction meeting FRA’s definition, i.e., limits routine job functions, but the employee does all of his or her routine job functions anyway?**

A41. You must report the injury or illness on Form FRA F 6180.55a as a restricted work case. If a physician or other licensed health care professional recommends a job restriction, you should ensure that the employee complies with that restriction. (This language is purely advisory and does not impose an enforceable duty upon employers to ensure that employees comply with the recommended restriction.) 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 report the case based upon that recommendation. In the absence of conflicting opinions from two or more health care professionals, the employer ordinarily must record the case if a health care professional recommends a work restriction involving the employee’s routine job functions. See section 6.4, of this Guide, on Covered Data.

**Q42. One of our employees experienced minor musculoskeletal discomfort. The health care professional who examined the employee only provided first aid treatment. In addition, it was determined that the employee is fully able to perform all of her routine job functions. When the employee returned to work, we decided to limit the duties of the employee for the purpose of preventing a more serious condition from developing. Is this a restricted work case?**

A42. No. Since the minor musculoskeletal discomfort has not met any of the general criteria, e.g., medical treatment; the employer’s decision to impose a work restriction following such minor musculoskeletal discomfort would not make this a restricted work case.

**Q43. Will the determination of whether or not a case involves restriction always be made by the medical professional who examines an employee?**

A43. No. Day(s) of restriction also occur if the employer restricts one or more of the employee’s routine job functions in connection with an otherwise reportable case. For example, an employee sustains an injury and is given a prescription to take for a few days. The doctor tells the employee that he can return to work. The employee’s routine job duties involve operating equipment. The employer does not allow the employee to operate the machinery he normally would because of concerns about the effects of the medication, and instead has the employee perform an inventory. This would be a restricted work case.



**Q44. Do I have to report a day of restriction if an employee fails to follow a PLHCP’s recommended work restriction?**

A44. You should ensure that the employee complies with the recommended restriction. In the absence of conflicting opinions from two or more health care professionals, the employer must report one day of restriction if a professional recommends a work restriction involving the employee’s routine job functions, and if a day away from work has not already occurred. See section 6.4, of this Guide, on Covered Data.

**Q45. How do I report a case where the worker works only for a partial work shift because of a work-related injury or illness?**

A45. A partial day of work is reported as a day of job transfer or restriction for recordkeeping purposes, except for the day on which the injury occurred or the illness began.

**Q46. If the injured or ill worker produces fewer goods or services than he or she would have produced prior to the injury or illness, but otherwise performs all of the routine functions of his or her work, is the case considered a restricted work case?**

A46. No. The case is considered restricted work only if the worker does not perform all of the routine functions of his or her job or does not work the full shift that he or she would otherwise have worked.

**Q47. How do I handle vague restrictions from a physician or other licensed health care professional, such as that the employee engage only in “light duty” or “take it easy for a week?”**

A47. If you are not clear about the physician or other licensed health care professional’s recommendation, you may ask that person whether the employee can do all of his or her routine job functions and work all of his or her normally assigned work shift. 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 reported as such. If the answer to one or both of these questions is “No,” the case involves restricted work and must be reported as a restricted work case. If you are unable to obtain this additional information from the physician or other licensed health care professional who recommended the restriction, report the injury or illness as a case involving restricted work.

**Q48. If an employee who routinely works 10 hours a day is restricted from working more than 8 hours following a work-related injury, is the case reportable?**

A48. Generally, the employer must report any case in which an employee's work is restricted because of a work-related injury. A work restriction occurs when the employer keeps the employee from performing one or more routine functions of the job, or from working the full workday the employee would otherwise have been scheduled to work. The case in question is reportable if the employee presumably would have worked 10 hours had he or she not been injured.

**Q49. An employee was injured at work and work-relatedness is established for reporting purposes. The employee was not able to drive himself to work. The employee may have had a cast or splint on, arm in a sling, using crutches, or leg immobilized, etc. The railroad had work the employee could have done, if the employee could have gotten to work. The employee stated he was not able to drive. Prior to the injury, the employee drove himself to work every day. He was not in a car pool, and didn't catch a ride with co-workers, etc. Would this case be a days away from work case or a restricted work activity case? If the railroad provided transportation (even though not required by the regulation to do so), could the company count the days as restricted or must they still count the days as days away from work? Would the answer be the same if the employee's doctor wrote a restriction of "no driving" but the company says "the employee can get a ride with someone else, we have work available"?**

**What if an employee is injured and is placed under a work restriction(s) by a physician; however, the railroad does not have any available restricted work for a period of time?**

A49. If the employee does not make it to work, the case must be reported as a case involving days away from work. If the employee is driven to work by the railroad, or anyone else, and the employee performs restricted work, the case must be reported as a case involving restricted work activity. If a PLHCP places the employee under a work restriction, but the employer has no available restricted work, then this would be reported as a case involving days away from work.

**Q50. How do I decide if an injury or illness involved a transfer to another job?**

A50. If you assign an injured or ill employee to a job other than his or her regular job for part of the day, the case involves transfer to another job.

Note: This does not include the day on which the injury or illness occurred.

**Q51. Are transfers to another job reported in the same way as restricted work cases?**

A51. Yes. Both job transfer and restricted work cases are reported on Form FRA F 6180.55a. For example, if you assign, or a physician or other licensed health care professional recommends that you assign, an injured or ill worker to his or her 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 report an injury or illness that involves a job transfer by placing a “Y” (for yes) in the box for job transfer, 5r.

**Q52. How do I count days of job transfer or restriction?**

A52. 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 1 day of restricted work or job transfer for such cases.

### ***6.9.2 Counting Days Away from Work and Days of Restriction***

FRA needs a count of the days an employee is away from work and/or restricted while at work because of an injury or occupational illness for classification of the severity of the injury/illness and for other purposes.

Day away from work is defined at § 225.5.

Day of restricted work activity is defined at § 225.5.

Frequently, an employee’s condition is such that it will result in lost/restricted days extending beyond the 30-day filing deadline. If this occurs, you must make a good faith estimate of the additional number of days that may accrue for the case and record this on the initial Form FRA F 6180.55a. A record of the actual count of these days must be maintained for the affected employee. After the employee returns to work at full capacity, or the actual days exceeds the original estimate, a corrected report must be submitted that shows the actual count of days if these are significantly different from the original estimate. A significant difference in this context is a variance of 10 percent or more between the number of days that has been reported and the count that you maintain in your records.

When reporting the count of days, the following guidelines are to be followed:

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1. The day of the accident/incident is not to be included in either count.
2. If it is necessary during a workday for an employee to have a followup examination, or receive additional medical care, etc., the time spent going to and coming from such an appointment is not considered restricted time. If the employee was not already on restricted duty prior to going to, or upon returning from such visits, a day of restriction need not be charged. If the employee does not report to work at all on such days, a day away from work has occurred.
3. If an employee takes off to see a physician for an initial evaluation after the day of an injury/illness, and provided that none of the reportability criteria is met, a day away from work is not to be charged, since there has not been a reportable condition.
4. Damage to an employee's personal effects, such as eye glasses, hearing aids, or dentures, is not by itself reportable. If a reportable injury did not also occur, the work days lost while awaiting repair or replacement of these articles are not to be charged.

### 6.10 Exceptions to Medical Treatment (First Aid)

“Medical treatment” is the management and care of a patient to combat disease or a disorder. For the purposes of Part 225, medical treatment does not include:

1. Visits to a physician or other licensed health care professional solely for observation or counseling;
2. The conduct of diagnostic procedures, such as x-rays and blood tests, including the administration of prescription medications used solely for diagnostic purposes (e.g., eye drops to dilate pupils); or
3. First aid treatment. The following is a comprehensive list of “First aid treatment.” If the treatment given is not on this list, it is considered to be “Medical treatment.” For the purposes of Part 225, “First aid” means the following:
  - a. Using a nonprescription medication at nonprescription strength. (For medications available in both prescription and non-prescription form, a recommendation by a physician or other licensed health care professional to use a non-prescription medication at prescription strength is considered medical treatment for recordkeeping and reporting 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.

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- 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, or surgical glues are considered medical treatment.)
- e. Using hot or cold therapy, e.g., heating pads or ice packs.
- f. Using any non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc. (Devices with rigid stays or other systems designed to immobilize parts of the body are considered medical treatment for recordkeeping and reporting 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. (Any other physical therapy, other than that identified as first aid, provided by a PLHCP or administered under the supervision of a PLHCP, and chiropractic treatment are considered medical treatment for recordkeeping and reporting purposes. Examples include acupuncture and electronic stimulation.)
- n. Drinking non-prescription fluids for relief of heat-related conditions.
- o. Pre-hospital protocol. (During transport, the injured person may be restrained with a body board, neck brace, receive oxygen, or have an intravenous (IV) needle inserted. These pre-hospital protocol procedures are generally considered to be first aid as long as they are performed without symptoms being exhibited that would specifically require such treatment. See “Q&A” 65 and 66 below, for additional guidance.)

Note: A case involving first aid treatment must be further evaluated to determine if any of the other reporting criteria are met. For example, for some employees, the application of an eye patch may restrict the employees’ ability to perform their routine job functions. The case then becomes reportable on the basis of restriction of work or transfer to another job.

### 6.10.1 Questions and Answers on First Aid

**Q53. Is a physical therapist considered a “health care professional” under the definition of health care professional?**

A53. Yes. A physical therapist’s license allows him or her to independently perform, or be delegated the responsibility to perform, physical therapy.

**Q54. Are any other procedures included in first aid?**

A54. No. This Guide has provided a complete list of all treatments considered to be “first aid” for Part 225 purposes.

**Q55. An extra gang laborer was clearing an overgrown area of soil, gravel, and weeds. In doing so, he disrupted a yellow jacket nest, receiving multiple stings to the hand, arm, ear, neck, and back areas. The employee was immediately driven to a local clinic and seen by a physician. The employee received injections of Benadryl and Kenalog and was advised to apply ice packs, drink fluids, and rest.**

**In two separate communications, a second physician, while admitting that the treating physicians’ use of Benadryl and Kenalog injections was “within the standard of care” for the injury suffered, went on to state that “Many providers would have instead offered oral diphenhydramine (Benadryl) and topical triamcinalone (Kenalog).” In other words, the second physician stated that the injury could have been treated by administering first aid, and, therefore, resulting in a non-reportable injury.**

**Since the second physician said the employee could have been effectively treated by first aid treatment, do we need to report?**

**In addition, some of our employees carry a bee sting kit and do their own injections. When this occurs, do we need to report?**

A55. A work-related injury or illness must be recorded on the Railroad Employee Injury and/or Illness Record, Form FRA F 6180.98, and reported on Form FRA F 6180.55a, if it results in death, days away from work, restricted work or transfer to another job, medical treatment beyond first aid, loss of consciousness, or diagnosis of a serious injury or illness. Medical treatment is generally recognized to be “the management and care of a patient to combat disease or disorder.” First aid (see section on First Aid and Medical Treatment) does not fall within the

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definition of medical treatment. However, all prescription medications, even those given as a single dose, are medical treatment.

In certain circumstances, FRA's requirements permit a railroad to choose between two conflicting or differing medical recommendations. When employees receive contemporaneous recommendations (at the same time) from two or more physicians or other licensed health care professionals about the need for medical treatment, employers may decide which recommendation is the most authoritative and report the case based on that recommendation. *However, once medical treatment is provided for a work-related injury or illness, the case is reportable.*

In regard to the question of self-injection, the answer is yes, this must be reported. If prescription medication is authorized for use by a physician or qualified health care professional, it makes no difference who administers the medication.

**Q56. Are surgical glues used to treat lacerations considered “first aid?”**

A56. No. Surgical glue is a wound-closing device. All wound-closing devices, except for butterfly bandages and Steri-Strips™, are by definition “medical treatment” because they are not included on the first aid list.

**Q57. The PLHCP used liquid bandages on a wound; is this medical treatment or first aid?**

A57. The concept that underlies the medical treatment vs. first aid distinction made between this type of treatment centers around the basic difference between wound coverings and wound closures using OTC vs. wound closures that are typically performed by a PLCHP. Using wound coverings, such as bandages (including liquid bandages), Band-Aids™, gauze pads, butterfly bandages or Steri-Strips™ are deemed to be first aid treatment. The use sutures, staples, special bonding glues used by a PLCHP are considered medical treatment.

**Q58. Is the use of a rigid finger guard considered first aid?**

A58. Yes. The use of finger guards is always first aid.

**Q59. If prescription medications are prescribed as “PRN” (per required need) is it reportable if the patient does not take or use the prescribed medicine?**

A59. FRA has decided to retain its longstanding policy of requiring the reporting of cases in which a health care professional issues a prescription, regardless of whether that prescription is filled or actually taken by the employee. A patient's refusal of the medication does not alter the fact that, in the health care

professional's judgment, the case warrants medical treatment. In addition, a rule that relied on whether a prescription is filled or taken, rather than on whether the medicine was prescribed, would create administrative difficulties for employers, because such a rule would mean that the employer would have to investigate whether a given prescription had been filled or whether the medicine had actually been used. Also, many employers and employees may consider an employer's inquiry about the filling or taking of a prescription to be an invasion of the employee's privacy.

**Q60. The employee visited a PLHCP due to an on-the-job injury. The PLHCP issued a single dose medication and no prescription was written. The medication was to be taken only if needed (PRN). The employee chose not to take the medication. Is this case FRA reportable?**

A60. Prescription medications, whether given once or over a longer period of time, are not included in the list of first aid treatments. FRA believes that the use of prescription medications is not first aid because prescription medications are powerful substances that can only be prescribed by a physician or licensed health care professional. The availability of these substances is carefully controlled and limited, because they must be prescribed and administered by a highly trained and knowledgeable professional.

Medications classified as first aid are only when employees use a nonprescription medication at nonprescription strength. (For medications available in both prescription and non-prescription form, a recommendation by a physician or other licensed health care professional to use a non-prescription medication at prescription strength is considered medical treatment for recordkeeping purposes).

FRA maintains its longstanding policy of requiring the reporting of cases in which a health care professional issues a prescription or dispenses a single dose, whether that prescription is filled or not. Medical treatment includes treatment that is used, as well as those that should have been used. The patient's acceptance or refusal of the treatment does not alter the fact that, in the health care professional's judgement, the case warranted a script for the issuance of prescription medicine. For these reasons, the new recordkeeping rule continues FRA's longstanding policy of considering the recommendation of prescription medication as medical treatment, regardless of the reason it is prescribed.

**Q61. For medications such as Ibuprofen that are available in both prescription and non-prescription form, what is considered to be prescription strength? How is an employer to determine whether a non-prescription medication has been recommended at prescription strength?**



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A61. The prescription strength of such medications is determined by the measured quantity of the therapeutic agent to be taken at one time, i.e., a single dose. The single dosages that are considered prescription strength for four common over-the-counter drugs are:

- Ibuprofen (such as Advil™) - Greater than 467 mg
- Diphenhydramine (such as Benadryl™) - Greater than 50 mg
- Naproxen Sodium (such as Aleve™) - Greater than 220 mg
- Ketoprofen (such as Orudis KT™) - Greater than 25 mg

To determine the prescription-strength dosages for other drugs that are available in prescription and non-prescription formulations, the employer should contact the U.S. Food and Drug Administration, a local pharmacist, or a physician.

**Q62. “Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs, or other simple means...” What are “other simple means” of removing splinters that are considered first aid?**

A62. “Other simple means” of removing splinters, for purposes of the definition of “first aid” means methods that are reasonably comparable to the listed methods. Using needles, pins, or small tools, e.g., nail clippers or manicure scissors, to extract splinters would generally be included.

**Q63. Does the professional status of the person providing the treatment have any effect on what is considered first aid or medical treatment?**

A63. No. FRA considers the treatments listed above to be first aid regardless of the professional status of the person providing the treatment. Even when these treatments are provided by a physician or other licensed health care professional, they are considered first aid for the purposes of Part 225. Similarly, FRA considers treatment beyond first aid to be medical treatment even when it is provided by someone other than a physician or other licensed health care professional.

**Q64. If an employee is exposed to chlorine or some other substance at work and oxygen is administered as a precautionary measure, is the case reportable?**

A64. It is often a standard procedure of emergency rescue teams to administer preventive treatment such as oxygen or apply an intravenous saline solution while a patient is being transported to a medical facility for further evaluation. Such preventive treatment does not make the incident reportable. If oxygen is administered as a purely precautionary measure to an employee who does not

exhibit any signs or symptoms of an injury or illness, the case is not reportable. If the employee exposed to a substance exhibits symptoms of an injury or illness, the administration of oxygen makes the case reportable.

**Q65. During transport to the hospital, the Emergency Medical Team may perform some precautionary procedures that could be considered beyond first aid. Is this reportable?**

A65. Emergency transport is considered first aid. During transport, the injured person may be restrained with a body board, neck brace, receive oxygen, or have an IV needle inserted. These pre-hospital protocol procedures are generally considered to be first aid as long as they are performed without signs or symptoms being exhibited that would specifically require such treatment. As in the previous question, if the person is not being treated for dehydration or some other condition that requires a saline IV, then simply receiving a saline IV as a precautionary measure is considered to be first aid.

The use of casts, splints, or orthopedic devices designed to immobilize an injured body part to permit it to rest and recover is considered medical treatment. The use of temporary immobilization devices while transporting an accident victim (e.g., splints, slings, neck collars, back boards) is precautionary in nature, and their use is to avoid exacerbation of a condition that may or may not exist. In these specific situations, a splint or other device is used as temporary first aid treatment, may be applied by non-licensed personnel using common materials at hand, and often does not reflect the severity of the injury. If following an examination it is determined that continued use of the immobilization device is warranted, then the case is reportable.

**Q66. Item (n) on the first aid list is “drinking non-prescription fluids for relief of heat-related conditions.” Does this include administering IV fluids?**

A66. No. Intravenous administration of fluids to treat work-related heat-related conditions is medical treatment.

**Q67. What makes a heat stroke or heat exhaustion reportable? How is it reported?**

A67. Heatstroke is similar to heat cramps and heat exhaustion, but can have much more severe consequences. It is one of the heat-related problems that often result from heavy work in hot environments, usually accompanied by inadequate fluid intake. Older adults, people who are obese, and people born with an impaired ability to sweat are at high risk of heatstroke. Other risk factors include dehydration, alcohol use, cardiovascular disease, and the use of certain medications.

What makes heatstroke much more severe and potentially life-threatening is that the body's normal mechanisms for dealing with heat stress, such as sweating and temperature control, are lost. The main sign of heatstroke is a markedly elevated body temperature—generally greater than 104° F—with changes in mental status ranging from personality changes to confusion and coma. Skin may be hot and dry, although in heatstroke caused by exertion, the skin is usually moist.

Different people may have different signs or symptoms of heatstroke and other heat-related disorders, e.g., heat exhaustion due to dehydration. But common signs or symptoms include:

Rapid heartbeat, the absence of sweating, hot red or flushed dry skin, rapid and shallow breathing, high body temperature, rapid pulse, elevated or lowered blood pressure, headache, irritability, confusion or unconsciousness.

In cases of mild dehydration, simple rehydration is recommended by drinking fluids. Many sports drinks on the market effectively restore body fluids, electrolytes, and salt balance. Drinking non-prescription fluids for relief of heat-related conditions is first-aid treatment.

For moderate to severe dehydration, intravenous fluids may be required. Cases of serious dehydration should be treated as medical emergencies, and hospitalization, along with intravenous fluids, is necessary. Immediate action should be taken. Intravenous administration of fluids to treat heat-related conditions is medical treatment and reportable.

As in any evaluation of a workplace injury or illness, a determination must be made as to work-relatedness. If the injury or illness is work related, then to be reportable it must meet the one of the requirements set forth in § 225.19.

Heat stroke/sun stroke is reported in block 5i of Form FRA F 6180-55a as code 1141, and heat exhaustion as code 1144; see Injury and Illness Codes in Appendix E.

**Q68. What if a physician or other licensed health care professional recommends medical treatment but the employee does not follow the recommendation?**

A68. If a physician or other licensed health care professional recommends medical treatment, you should encourage the injured or ill employee to follow that recommendation. However, you must report the case even if the injured or ill employee does not follow the physician or other licensed health care

professional's recommendation; the fact that there was a recommendation triggers the duty to report.

**Q69. Is every work-related injury or illness case involving a loss of consciousness reportable?**

A69. Yes. You must report a work-related injury or illness if the worker becomes unconscious, regardless of the length of time the employee remained unconscious.

**Q70. What is a “significant” diagnosed injury or illness that is reportable under the general criteria 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?**

A70. Work-related cases involving cancer, chronic irreversible disease, a fractured or cracked bone, or a punctured eardrum must always be reported under the general criteria at the time of diagnosis by a physician or other licensed health care professional.

**Q71. We had a case of an employee on-duty who fell approximately 4 feet from a platform and landed on his back on a concrete area. He was immediately taken to the emergency room, and the doctor prescribed a prescription medication for pain, making a notation on the medical documentation. Before writing out the actual prescription, the employee refused the prescription medication. The doctor marked out the prescription medication on the medical documentation with the notation “employee refused.” The doctor then prescribed an “over-the-counter” medication for the employee. Would medical treatment, and thus reportability, be involved in this case?**

A71. In conformity with OSHA, FRA believes that the use of prescription medications is not first aid because prescription medications are powerful substances that can only be prescribed by a physician or licensed health care professional. The availability of these substances is carefully controlled and limited because they must be prescribed and administered by a highly trained and knowledgeable professional. OSHA and FRA maintain their longstanding policy of requiring the recording/reporting of cases in which a health care professional issues a prescription, whether that prescription is filled or not. Medical treatment includes treatment that is used as well as those that should have been used. The patient's acceptance or refusal of the treatment does not alter the fact that, in the health care professional's judgment, the case warranted a script for the issuance of prescription medicine. For these reasons, FRA continues to be in conformity with OSHA's longstanding policy of considering the use of prescription medication as medical treatment, regardless of the reason it is prescribed.

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### **6.11 Reporting Requirements for Significant Injury or Illness to Railroad Employees**

A significant injury to or significant illness of a railroad employee diagnosed by a physician or other licensed health care professional must be reported even if the injury or illness does not result in death, a day away from work, restricted work activity or job transfer, medical treatment, or loss of consciousness. See § 225.19(d)(2)(ii) and (d)(5).

FRA believes that most significant injuries and illnesses will result in one or more of the following:

1. Death.
2. Days away from work.
3. Restricted work or transfer to another job.
4. Medical treatment beyond first aid.
5. 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. FRA believes that cancer, chronic irreversible diseases, fractured or cracked bones, and punctured eardrums are generally considered significant injuries and illnesses, and must be reported at the initial diagnosis even if medical treatment or work restrictions are not recommended, or are postponed, in a particular case. See § 225.5 for definitions of “Significant Illness” and “Significant Injury.”

### **6.12 Reporting Requirements for Specific Case Criteria**

An illness or injury that meets the application of any of the following specific case criteria is reportable:

- (i) A needlestick or sharps injury to a railroad employee;
- (ii) Medical removal of a railroad employee;
- (iii) Occupational hearing loss of a railroad employee;
- (iv) Occupational tuberculosis of a railroad employee; or
- (v) A musculoskeletal disorder of a railroad employee if this disorder is independently reportable under one or more of the general reporting criteria. See § 225.19(d)(6).

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### *6.12.1 Reporting Criteria for Needlestick and Sharps Injuries*

You must report 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 by 29 CFR 1910.1030). "Sharps" are any contaminated objects that can penetrate the skin, including, but not limited to: needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires. You must report the case on Form FRA F 6180.55a as an injury.

### *Questions and Answers on Needlesticks and Sharps*

**Q72. What does "other potentially infectious material" mean?**

A72. Other potentially infectious material (OPIM): For purposes of employee injury illness reporting, this term has the same meaning as in OSHA's bloodborne pathogens standard at 29 CFR § 1910.1030, as amended, which on the date of issuance of this Reporting Guide defines OPIM as:

- (1) The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids;
- (2) Any unfixed tissue or organ (other than intact skin) from a human (whether living or dead); and
- (3) HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organ, or other tissues from experimental animals infected with HIV or HBV.

**Q73. Does this mean that I must report all cuts, lacerations, punctures, and scratches?**

A73. No. You need to report 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 report the case only if it meets one or more of the general reporting criteria.

**Q74. If I report an injury and the employee is later diagnosed with an infectious bloodborne disease, do I need to update Form FRA F 6180.55a report?**

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A74. Yes. You must update the classification of the case on a corrected Form FRA F 6180.55a if the case results in death, days away from work, restricted work, or job transfer. You must also update the description to identify the infectious disease and change the classification of the case from an injury to an illness.

**Q75. What if one of my employees is splashed or exposed to blood or other potentially infectious material without being cut or scratched? Do I need to report this incident?**

A75. You need to report such an incident on Form FRA F 6180.55a as an illness if:

1. It results in the diagnosis of a bloodborne illness, such as HIV, hepatitis B, or hepatitis C; or
2. It meets one or more of the general reporting criteria.

### ***6.12.2 Reporting Criteria for Cases Involving Medical Removal***

If an employee is medically removed under the medical surveillance requirements of an OSHA standard, you must report the case.

You must report each medical removal case as either a case involving days away from work or a case involving restricted work activity, depending on how you decide to comply with the medical removal requirement. If the medical removal is the result of a chemical exposure, you must report the case as one involving “poisoning.”

### ***Questions and Answers on Medical Removal***

**Q76. Do all of OSHA’s standards have medical removal provisions?**

A76. No. Some OSHA standards, such as the standards covering bloodborne pathogens and noise, do not have medical removal provisions. Many OSHA 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.

**Q77. Do I have to report a case where I voluntarily removed the employee from exposure before the medical removal criteria in an OSHA standard are met?**

A77. No. If the case involves voluntary medical removal before the medical removal levels required by an OSHA standard are reached, you do not need to report the case.

### *6.12.3 Reporting Criteria for Cases Involving Occupational Hearing Loss*

Basic requirement. If an employee's hearing test (audiogram) reveals that the employee has experienced a work-related standard threshold shift (STS) in hearing in one or both ears, and the employee's total hearing level is 25 decibels (dB) or more above audiometric zero (averaged at 2000, 3000, and 4000 Hz) in the same ear(s) as the STS, the case must be reported on Form FRA F 6180.55a.

### *Questions and Answers on Occupational Hearing Loss*

#### **Q78. How do I determine whether an STS has occurred?**

A78. An STS is defined in the occupational noise exposure standard at 29 CFR 1910.95(g)(10)(i), as a change in hearing threshold, relative to the baseline audiogram for that employee, of an average of 10 dB or more at 2000, 3000, and 4000 hertz (Hz) in one or both ears.

**STS.** If the employee has never previously experienced a reportable hearing loss, you must compare the employee's current audiogram with that employee's baseline audiogram. If the employee has previously experienced a reportable hearing loss, you must compare the employee's current audiogram with the employee's revised baseline audiogram (the audiogram reflecting the employee's previous reportable hearing loss case).

**25-dB loss.** 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.

#### **Q79. May I adjust the audiogram results to reflect the effects of aging on hearing?**

A79. Yes. When you are determining whether an STS has occurred, you may age adjust the employee's current audiogram results by using Tables F-1 or F-2, as appropriate, in Appendix F of 29 CFR 1910.95. You may not use an age adjustment when determining whether the employee's total hearing level is 25 dB or more above audiometric zero.

#### **Q80. Do I have to report the hearing loss if I am going to retest the employee's hearing?**

A80. No. If you retest the employee's hearing within 30 days of the first test, and the retest does not confirm the reportable STS, you are not required to record the



hearing loss case on the log. If the retest confirms the reportable STS, you must record the hearing loss illness on your log within 7 calendar days of the retest and include it on your monthly report. If subsequent audiometric testing performed under the testing requirements of the § 1910.95 noise standard indicates that an STS is not persistent, you may delete the case from Form FRA F 6180.55a.

**Q81. Are there any special rules for determining whether a hearing loss case is work-related?**

A81. No. It is possible for a worker who is exposed at or above the 8-hour 85-dBA action levels of the noise standard to experience a non-work-related hearing loss, and it is also possible for a worker to experience a work-related hearing loss and not be exposed above those levels. Therefore, there are no special rules for determining work-relatedness. You should follow the overall approach to determining work-relatedness—that a case is work-related if one or more events or exposures in the work environment either caused or contributed to the hearing loss, or significantly aggravated a pre-existing hearing loss.

**Q82. If a physician or other licensed health care professional determines the hearing loss is not work-related, do I still need to report the case?**

A82. If a physician or other licensed health care professional determines that the hearing loss is not work-related and has not been significantly aggravated by occupational noise exposure, you are not required to consider the case work-related or to report the case on Form FRA F 6180.55a.

### ***6.12.4 Reporting Criteria for Work-Related Tuberculosis Cases.***

If any of your employees has been occupationally exposed to anyone with a known case of active tuberculosis (TB), and that employee subsequently develops a tuberculosis infection, as evidenced by a positive skin test or diagnosis by a physician or other licensed health care professional, you must report the case on Form FRA F 6180.55a.

### ***Questions and Answers on Tuberculosis***

**Q83. Do I have to report a positive TB skin test result for an employee that was obtained at a pre-employment physical?**

A83. No. You do not have to report it because the employee was not occupationally exposed to a known case of active tuberculosis in your workplace.

### ***6.12.5 Reporting Criteria for Cases Involving Work-Related Musculoskeletal Disorders***

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If any of your employees experiences a reportable work-related musculoskeletal disorder (MSD), you must report it on Form FRA F 6180.55a.

### ***Questions and Answers on Musculoskeletal Disorders***

**Q84. What is a “musculoskeletal disorder” or MSD?**

A84. MSDs are disorders of the muscles, nerves, tendons, ligaments, joints, cartilage and spinal discs. MSDs do not include disorders caused by slips, trips, falls, motor vehicle accidents, or other similar accidents. Examples of MSDs include: carpal tunnel syndrome, rotator cuff syndrome, De Quervain’s disease, trigger finger, tarsal tunnel syndrome, sciatica, epicondylitis, tendinitis, Raynaud’s phenomenon, carpet layers knee, herniated spinal disc, and lower back pain.

**Q85. How do I decide which musculoskeletal disorders to report?**

A85. There are no special criteria for determining which musculoskeletal disorders to report. An MSD case is reported using the same process you would use for any other injury or illness. If a musculoskeletal disorder is work-related, is a new case, and meets one or more of the general reporting criteria, you must report the musculoskeletal disorder.

**Q86. Are there any special rules regarding injuries and illnesses to soft tissues?**

A86. No. Work-related injuries and illnesses involving muscles, nerves, tendons, ligaments, joints, cartilage and spinal discs are reportable under the same requirements applicable to any other type of injury or illness. There are no special rules for reporting these cases: if the case is work-related and involves medical treatment, days away, job transfer or restricted work, it is reportable.

**Q87. An employee is diagnosed with a mild case of carpal tunnel syndrome. The illness is work-related, but there is no treatment prescribed other than a change in office equipment. Is this reportable?**

A87. This case would not be considered reportable since none of the requirements for reportability are shown to have occurred, i.e., no day(s) away from work; no restriction of work activity or job transfer; no loss of consciousness; and no medical treatment. The railroad has the requirement to establish an accountable record on Form FRA F 6180.98 within 7 days of receiving knowledge that an accountable case has occurred, and to monitor that case for a period of 180 days from the date of diagnosis of the illness. Should any of the requirements be met for reportability within that 180-day monitoring period, the case would become reportable.

**Q88. If a work-related MSD case involves only subjective symptoms like pain or tingling, do I have to report it as a musculoskeletal disorder?**

A88. The symptoms of an MSD are treated the same as symptoms for any other injury or illness. If an employee has pain, tingling, burning, numbness or any other subjective symptom of an MSD, and the symptoms are work-related, and the case is a new case that meets the reporting criteria, you must report the case on Form FRA F 6180.55a as a musculoskeletal disorder.

### *6.12.6 Miscellaneous Questions and Answers*

**Q89. What should I do if an employee death occurs in the workplace and it is not immediately known if it is work related?**

A89. Under § 225.9, you must make an immediate report by toll-free telephone (800-424-0201 or 800-424-8802) whenever an employee dies while in the work environment. You do not need to prepare a Form FRA F 6180.55a if it is later established that the death is not work related.

**Q90. Does an employee report of an injury or illness establish the existence of the injury or illness for reporting purposes?**

A90. No. In determining whether a case is reportable, the employer must first decide whether an injury or illness, as defined earlier, has occurred. If the employer is uncertain about whether an injury or illness has occurred, the employer may refer the employee to a physician or other health care professional for evaluation and may consider the health care professional's opinion in determining whether an injury or illness exists. [Note: If a physician or other licensed health care professional diagnoses a significant injury or illness within the meaning of this section, and the employer determines that the case is work-related, the case must be reported.]

**Q91. Must a railroad report a case if an employee alleges that an injury or illness has occurred but refuses to release any medical records related to the alleged injury or illness?**

A91. Medical verification is not required for reportability. However, a railroad has the responsibility to make good-faith reporting determinations, and these decisions must be based upon whatever documentation is available. If a railroad questions the validity of an employee's alleged injury or illness and there is no substantive or medical documentation to support the allegation, the railroad need not report the case. However, if at a later date the appropriate information is received that

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supports the employee's allegation of injury or illness, then a late report must be made.

**Q92. If a maintenance employee is cleaning the parking lot or an access road and is injured as a result, is the case work-related?**

A92. Yes. The case is work-related because the employee is injured as a result of conducting company business in the work environment. If the injury meets the general reporting criteria (death, days away, etc.), the case must be reported.

**Q93. Are cases of workplace violence considered work-related under the reporting criteria?**

**If an employee dies or is injured or infected as a result of terrorist attacks, should it be recorded on the FRA Form F 6180.98, and reported to FRA on FRA Form F 6180.55a?**

A93. The criteria contain no general exception, for purposes of determining work-relatedness, for cases involving acts of violence in the work environment. Injuries and illnesses that result from a terrorist event or exposure in the work environment are considered work-related for FRA recordkeeping purposes. FRA does not provide an exclusion for violence-related injury and illness cases, including injuries and illnesses resulting from terrorist attacks.

**Q94. If an employee's pre-existing medical condition causes an incident which results in a subsequent injury, is the case work-related? For example, if an employee suffers an epileptic seizure, falls on the track, and breaks his arm, is the case reportable?**

A94. Neither the seizure nor the broken arm is reportable, so long as nothing in the work environment caused or contributed to the seizure. Injuries and illnesses that result solely from non-work-related events or exposures are not reportable. Epileptic seizures are a symptom of a disease of non-occupational origin, and the fact that they occur at work does not make them work-related. Because epileptic seizures are not work-related, injuries resulting solely from the seizures, such as the broken arm in the case in question, are not reportable.

**Q95. Does the size or degree of a burn determine reportability?**

A95. No. The size or degree of a work-related burn does not determine reportability. If a work-related first, second, or third degree burn results in days absent from work, work restrictions, medical treatment, etc., the case must be reported.

**Q96. If an employee dies during surgery made necessary by a work-related injury or illness, is the case reportable? What if the surgery occurs weeks or months after the date of the injury or illness?**

A96. If an employee dies as a result of surgery or other complications following a work-related injury or illness, the case is reportable. If the underlying injury or illness was reported prior to the employee's death, the employer must submit a corrected Form FRA F 6180.55a to change the injury classification from nonfatal to fatal.

**Q97. Our railroad has a program that allows employees who have been involved in an accident to take a personal day(s) off if they indicate they were "shaken up," i.e., they expressed some need to have time off to recover from being involved in an accident. These employees often do not have physical injuries, but may have experienced emotional trauma. How should we handle these cases?**

A97. The situation would generally not be reportable, especially if there are no injuries to be evaluated for reportability. You are not required to seek out information on mental illnesses from your employees. Mental illness cases are only to be considered when an employee voluntarily presents you with an opinion from the health care professional that the employee has a mental illness and that it is work-related. You are to record only those mental illnesses verified by a health care professional with appropriate training and experience in the treatment of mental illness, such as a psychiatrist, psychologist, or psychiatric nurse practitioner. In the event that the employer does not believe the reported mental illness is work-related, the employer may refer the case to a physician or other licensed health care professional for a second opinion.

**Q98. How long should we monitor an injury of an employee on duty? What about situations where the initial determination following an incident is that injury is not reportable, e.g., first aid only, but the employee notifies you after an extensive amount of time has elapsed that later medical treatment received is connected to the initial incident? What about illnesses for which it is uncertain when the initial exposure took place?**

A98. The employer is required to monitor a reportable employee injury for at least 180 calendar days following the date of the event or exposure causing the injury. This will ensure that the most serious final result for the case is reported, e.g., a nonfatal condition is upgraded to a fatality if the employee dies subsequent to the filing of the initial report. The 180-day timeframe is also necessary to determine if the cap for the sum of days absent and/or restricted has been met.

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It has been FRA's experience that a reportable injury will meet one or more of the reporting criteria, e.g., medical treatment, within 180 days following the employer's notification that a workplace incident has occurred. If an employee alleges that additional treatment was received following the conclusion of this 180-day period for a case that was not reportable, you are required to review any documentation you receive and evaluate if the later consequences are the result of a new incident. If it is determined that the later consequences are a result of new incident, then a report must be made.

Because illnesses may go undetected for extensive periods of time following a work place exposure, the 180 day tracking for these begins with the most recent diagnosis, or recognition that the condition exists.

The 180-day monitoring period does not affect the requirement to submit a late report if it is determined that a qualifying condition was not reported to FRA.

**Q99. Does going to a hospital for observation make a work-related injury reportable?**

A99. Visits to a physician or other licensed health care professional solely for observation or counseling, and the conduct of diagnostic procedures, such as x-rays and blood tests, including the administration of prescription medications used solely for diagnostic purposes (e.g., eye drops to dilate pupils) is first aid, and by itself not reportable.

**Q100. Is an injury that results in a chipped or broken tooth reportable?**

A100. FRA believes that fractured or cracked bones and broken teeth are generally considered significant injuries and must be reported at the initial diagnosis even if medical treatment or work restrictions are not recommended, or are postponed, in a particular case. (See section on reporting requirements for specific cases.)

**Q101. If an employee has a minor scratch but the physician gives him a tetanus shot anyway, does this constitute medical treatment and make the case reportable?**

A101. A tetanus shot is first aid treatment and not reportable. If the employee suffered some reaction or complication from the injection, requiring medical treatment or resulting in other reporting criteria being met, then the case would be reportable. (Other immunizations, such as Hepatitis B vaccine or rabies vaccine, are considered medical treatment.)

**Q102. Our employees are frequently tested for drug or alcohol use after an accident/incident. Company policy prohibits an employee from returning to work until the results of the tests are known and it is established that there is no risk factor due to impairment. Must we make a report because of the days the employee was held out of service while awaiting test results?**

A102. These cases are to be evaluated solely on the basis of the condition and its consequences. If the condition would have caused the employee to be absent from work had there been no testing, then a report must be made.

**Q103. I was hurt on the job, and my supervisor accompanied me to the clinic. My supervisor gave the nurse a card to give to the doctor that would be examining me. Our railroad utilizes a card that describes various treatments or therapies that require a report be made to the FRA. The card appears to encourage or suggest that the doctor consider treatment of a nonreportable nature. I feel this may unduly influence the medical facility and could affect the treatment I would have otherwise received had the card not been presented. Since my employer pays for the medical expenses, I am concerned that employees will be taken to treatment centers where this practice exists. The intent seems more to reduce reportable cases, rather than ensuring that the health care professional provides treatment that he or she believes is appropriate for the injury. Does FRA authorize the use of such cards or other communications of this nature to health care providers?**

A103. No. FRA is extremely concerned that injured workers receive proper medical treatment. We do not condone the use of any form or medical card that could adversely influence treatment by encouraging the use of nonreportable treatment.

Such practices are not only discouraged by FRA, but may also in certain circumstances constitute a violation of Part 225, subject to a civil penalty against the carrier or supervisor who engages in such practices.

**Q104. An employee was injured on the job and taken to a local hospital emergency room. The supervisor felt that the injury was not serious and was concerned that the case might be reportable. The employee requested that the supervisor stay out of the examining room. The attending physician in the emergency room prohibited the supervisor from being present.**

**What is considered appropriate conduct for a supervisor to engage in when an employee is injured and the supervisor is concerned the employee has exaggerated the extent of the injury?**

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A104. FRA is very concerned about injured employees receiving proper medical treatment. Often, the attending physician will ask questions about other conditions and medications a person is taking, or wish to discuss other findings. If the injured person feels restricted in discussing these issues, it can prevent proper treatment and violate a person's privacy.

FRA's policy on what constitutes harassment or intimidation that is calculated to prevent or discourage such person from either receiving proper medical treatment for an injury or illness on the part of a railroad supervisor or other company official includes, for example:

1. Asking a physician to recommend that an injured employee take only over-the-counter drugs sold at lower-than-prescription strength or behaving in any other way that might influence the treatment that the PLHCP might recommend.
2. Accompanying an injured employee into the examination room without a truly voluntary invitation. However, there would be no violation if an injured employee requested that a supervisor be present during a treatment because of a friendship or other good reason. Also, a supervisor may legitimately may be present because the employee is unconscious or very groggy and the supervisor is providing relevant information to the attending physician (these cases usually are already reportable to FRA, and the supervisor does not intend to influence the treatment nor alter reportability; the supervisor is merely assisting the employee in providing information to the physician or helping to record the physician's instruction to the injured employee that he or she may be incapable of otherwise recording or remembering).

### **Q105. An employee on duty suffers a fatal heart attack. Is the case reportable?**

A105. You must make immediate notification of a worker's death, regardless of suspected cause or circumstances (see Telephonic Reports of Certain Accidents/Incidents in Chapter 1 of this Guide). The FRA investigates all deaths reported by this notification requirement. If the death is ruled by the County medical examiner or coroner to be due to natural causes, and not associated with any work-related factors or exposure, then a report is not required.

**Q.106. A track worker stumbled on a rotten tie near the right-of-way and rolled down the embankment. Two other railroad employees observed the event. The worker was taken to a local PLHCP. After the examination, the PLHCP declared the employee fit for full duty; no medical treatment was provided. The employee chose not to report to work the next day, and took a day "sick" leave as provided for under the collective bargaining agreement. The**



**railroad completed the Form FRA F 6180.98 - Railroad Employee Injury and/or Illness Record. However, since the employee did not report to work the next day, does this qualify as an FRA reportable event?**

A.106. This case would not be reportable to FRA, because the employee injury did not meet the general reporting criteria. However, because the employee was examined by a PLHCP this does qualify as an accountable injury and the railroad must complete a Form FRA F 6180.98. Note, however, that if the employee called in sick because the PLHCP subsequently recommends time away from work or restricted duty then the injury would be reportable. For example, after being examined by the PLHCP and being declared fit for full duty, the employee's condition worsens; the employee contacts the PLHCP the day after being examined to discuss the injury and the PLHCP then recommends time away from work or restricted duty, thus making the case reportable.

**Q.107. A car cleaner strains his/her back during the performance of duty. The car cleaner calls the supervisor the next morning complaining of a very sore back and requests to stay home for a couple of days. The supervisor agrees to put the employee on administrative time. After two days the supervisor instructs the employee to see a PLHCP. The doctor declares the employee fit for full duty. What is the reporting obligation of the railroad?**

A.107. The supervisor should have instructed the employee to seek medical attention when called. If the supervisor instructs the employee to stay home, but pays the employee as if he were on duty or on administrative leave, the supervisor's actions indicate an admission by the railroad that the injury/illness is work-related. Likewise, if a railroad supervisor decides to restrict an employee's duties due to a claimed employee work-related injury/illness, the supervisor's actions indicate an admission by the railroad that the injury/illness is work-related. Accordingly, the railroad must complete the Form FRA F 6180.98 - Railroad Employee Injury and/or Illness Record and submit to FRA a completed Form FRA F 6180.55a - Railroad Injury and Illness Summary.

### **6.13 Reporting of Injuries to Persons Other Than Railroad Employees**

A report must be made for each fatality and each injury that requires medical treatment beyond first aid, results in loss of consciousness, or meets the definition of significant injury, that is discernably caused by an event or exposure arising from the operation of the railroad. There is a general presumption that any death or injury that occurs on a railroad's premises more likely than not is related to the operation of the railroad. Other cases become reportable if they are connected to an event or exposure that occurred on the railroad's premises, but affected persons not on the premises, e.g., a plume from a hazardous material release. A highway user who is

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involved in a highway-rail grade crossing accident/incident and is transported from the scene of a highway-rail grade crossing accident/incident to a medical facility via ambulance or other form of medical conveyance is presumed to have sustained an FRA reportable injury. Absent evidence to rebut this presumption, the railroad must report the injury to FRA on Form FRA F 6180.55a and show the injury on block 46 on Form FRA F 6180.57, "Highway-Rail Crossing Accident/Incident Report." If the railroad later discovers that the highway user did not sustain a reportable injury, the railroad must notify FRA in accordance with the late reporting instructions.

A description of first aid treatments can be found in the earlier section describing the requirements for reporting railroad employee reporting.

*Determination of Nature and Severity of Highway-Rail Crossing Injuries:* In order to fulfill its responsibilities in determining the nature and severity of highway-rail grade crossing injury and to accurately report such injury, a railroad must try to contact the injured individual or their representative by telephone and, if unsuccessful in obtaining the needed information, in writing. The railroad must keep a record of its efforts to make such contact. This record and documentation of any information obtained must be available for review and copying by an FRA representative under the same criteria as set forth in § 225.35 (b).

*Determination of Nature of Trespasser Fatality:* In order to fulfill its responsibilities in determining the nature of a trespasser fatality and to accurately report such fatality, a railroad must try to obtain documentation indicating the cause of death by contacting a coroner or other public official by telephone and, if unsuccessful in obtaining the needed information, in writing. The railroad must continue its efforts to obtain this documentation for a period of six months following the month in which the fatality occurred. The railroad must keep a record of its efforts to obtain such documentation. This record and any documentation obtained must be available for review and copying by an FRA representative under the same criteria as set forth in § 225.35 (b).

### 6.13.1 Questions and Answers on Injuries to Persons Other Than Railroad Employees

**Q108. When you refer to an event or exposure arising from the operation of a railroad, would this include a motor vehicle incident between one of our employees and another person, e.g., a motorist lost control, crossed median strip, and struck a truck being driven by railroad employee?**

A108. As a general rule, only deaths and injuries that occur on the railroad premises must be reported, since there is a clear association with the operation of the railroad. However, there are exceptions. An example would be a hazardous material release from a railcar in the possession of the railroad, where the fumes drifted to an adjacent community and caused death or other reportable conditions. Since these persons were harmed as a direct result of an event that occurred on the

railroad's property, then the railroad is responsible for reporting any casualties associated with this event. In the example of the motor vehicle incident occurring off the railroad's property, you would not need to make a report for any person other than an employee of the railroad. Passengers from trains that were involved in an incident and were transferred by bus or other means who are harmed while off the premises must also be reported.

**Q109. Is there any difference in reporting requirements for the following cases?**

- **A trespasser was walking over a trestle when a train suddenly came in sight. He jumped from the trestle to avoid being struck, and broke a leg.**
- **A child was trespassing on a railroad bridge and fell to his death. There was no evidence that a train or railroad employees were present at the time of the accident.**

A109. No. Both situations are reportable since both the trestle and train are directly associated with the operation of the railroad.

**Q110. A body was found along our right of way. It was determined that death was a result of being struck by a train; however, several railroads operate over this segment of track. Who is responsible for reporting?**

A110. If known, the railroad operating the consist involved must report. If that railroad cannot be determined, then the railroad responsible for the track maintenance must report.

**Q111. A car was driving on a public overpass when the driver, who was not a railroad employee, lost control and the vehicle fell to our property below. The driver was seriously injured. Do we need to report this incident?**

A111. No. Unless there was some involvement of the railroad that was a cause of or contribution to the incident, then the injury to the driver would not be reportable.

**Q112. Can you provide some examples of situations involving reportable injuries suffered by a "Worker on Duty—Volunteer," a "Volunteer—Other," a "Worker on Duty—Contractor," and a "Contractor—Other" in the course of different types of work performed?**

A112. Example 1. A volunteer operates a locomotive for an excursion railroad. Operation of a locomotive clearly falls within the realm of "operation of on-track equipment." If the volunteer sustains a reportable injury (i.e., an injury resulting in death or requiring

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medical treatment) during operation of the locomotive, then the incident is reported as an injury to a “Worker on Duty—Volunteer” (Class H), with the applicable job code series.

- Example 2. A volunteer sits in a booth selling tickets for train rides on a tourist railroad that operates on the general system and also clears vegetation adjacent to its roadbed. Under 49 CFR § 213.37, vegetation is to be cleared from the roadbed for safe rail operations; vegetation clearing is, thus, an aspect of maintaining roadbed under § 209.303(b)(1) and is therefore considered a “safety-sensitive function.” Any injury sustained by the volunteer during the vegetation clearing is classified as one to a “Worker on Duty—Volunteer” (Class H). If any reportable injury is sustained by the volunteer during the process of selling tickets, then such injury is classified as one to a “Volunteer—Other” (Class I). If, however, the volunteer sells tickets and then clears vegetation during the same tour, then all injuries are considered as those attributable to a “Worker on Duty—Volunteer” (Class H). Therefore, when a volunteer is engaged in “mixed service,” the railroad must report all reportable injuries for that volunteer as those to a “Worker on Duty—Volunteer” (Class H) on Form FRA F 6180.55a. Conversely, when a contractor employee is engaged in such “mixed service” on railroad property, the railroad must report all reportable injuries for that contractor employee as those to a “Worker on Duty—Contractor” (Class F) on Form FRA F 6180.55a, with the applicable job code series of the service performed. Also note that if the volunteer in this example is working for a tourist railroad that operates exclusively off the general system, and if the incident that causes his injury is classified as a non-train incident that doesn’t involve operational on-track equipment, then Part 225 does not require the tourist railroad to report the injury at all. See § 225.3.
- Example 3. The employee of a contractor performs payroll as well as time-and-attendance functions for a railroad on railroad property. Such functions are not considered “safety-sensitive” because they are not related to the continued safety of the railroad and do not fall under the definition of any safety-sensitive function as defined in § 209.303. Thus, an injury sustained by this contractor performing those tasks is reported as that to a “Contractor—Other” (Class G).
- Example 4. A contractor employee inspects and replaces roller bearings for the reporting railroad on the railroad’s property. Injuries sustained by

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this contractor are reported as those to a “Worker on Duty—Contractor” (Class F) on Form FRA F 6180.55a. Under 49 CFR § 215.113, cars with defective roller bearings should not be in service, thus any injury associated with replacement of roller bearings is a “safety-sensitive function” qualifying as an injury attributable to a “Worker on Duty—Contractor” (Class F). In contrast, if this same injury was sustained by a contractor employee at the contractor’s facility off railroad property, then such injury would not be reported to FRA.

### **6.14 Miscellaneous Guidance**

Casualties to persons on trains or other on-track equipment, except for employees of another railroad, are to be reported by the railroad responsible for the consist at the time of the accident/incident.

Casualties to persons not on trains or other on-track equipment are to be reported by the railroad whose consist or operation was most directly involved, e.g., casualties away from railroad property resulting from a release of hazardous material.

Any person found unconscious or dead on or adjacent to a railroad’s premises or right-of-way is reportable by the railroad responsible for track maintenance if it is determined that the casualty resulted from the operation of a railroad and the identity of the railroad causing the accident/incident cannot be established in areas of joint operation.

When a person dies as a result of an accident/incident after the month in which the case was initially reported, the case will be reclassified as a fatality. Any death occurring under these circumstances is to be identified by correcting the original casualty record to change the casualty from nonfatal to fatal and the corrected report must be submitted with changes circled in red.

An entry for each casualty must be made on a separate line.

Each accident/incident must have an identifying number that is unique for the report month. All forms used by a railroad to report a single event or exposure must use the same accident/incident number. For example, if a highway-rail crossing accident injures more than one person, a separate line entry is used on Form FRA F 6180.55a to report each injury. A Form FRA F 6180.57 must also be completed. The same accident/incident identification number must be the same for all records.

#### **Coding Instructions Injuries Due to Gap Incidents**

A “gap incident” is a reportable injury involving a person who, while involved in the process of boarding or alighting a passenger train at a rail car door threshold plate at a high level passenger

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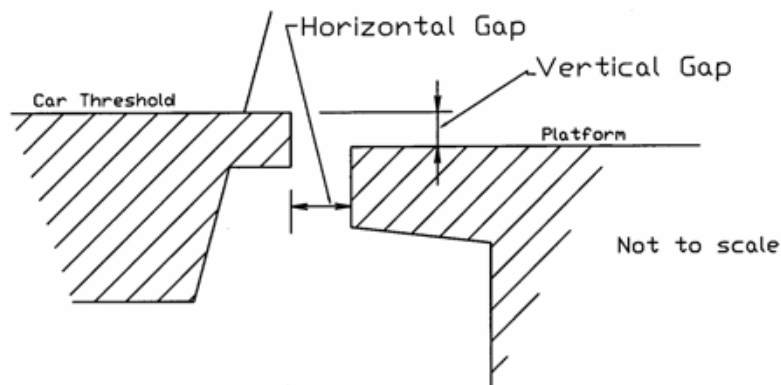
boarding platform (i.e., a platform that is 48" or more above the top of the rail), has one or more body parts enter the area between the car body and the edge of the platform or traveling between passenger cars. The following are examples of a Gap Incident:

- While boarding or alighting a passenger train at a high level passenger boarding platform a person misjudges the gap, resulting in the person's leg entering the gap.
- While boarding or alighting a passenger train at a high level passenger boarding platform, a person is struck by a closing door, resulting in the person's leg entering the gap.

The following are not examples of a Gap Incident:

- While boarding or alighting a passenger train at a high level passenger boarding platform, a person misjudges the gap and falls into the vestibule or platform, without a body part entering the gap.
- While walking on a passenger station at a high level passenger boarding platform, a person slips on the platform, at a location other than the rail car door threshold, resulting in the person's leg entering the gap.

Gap injuries usually occur when the high level platform station is concave, convex, misalignment between the platform and passenger car (see diagram) or when a person is traveling between cars and has one or more body parts enter the area between the cars.



### Coordination of Vehicle Floor with Boarding Platform

These gap injuries have special coding instructions and new codes were added to the Circumstance Codes (Appendix F).

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When an injury is a result of a person being injured as a result of a “gap” incident as defined above, the railroad must use, in block 5n ("Cause"), "Probably Reason for Injury/Illness Circumstance Code", code number 18, “Slipped, fell, stumbled due to Gap” regardless of whether other codes may be applicable.

The following codes would typically be used to describe a gap event on Form Railroad Injury and Illness Summary (Continuation Sheet) – Form FRA F 6180.55a.

Physical Act (block 5j)

A6 Getting out  
25 Getting off  
63 Stepping up  
64 Stepping down  
80 Stepping across (passenger cars)

Location (block 5k)

Part 1

P – Passenger Terminal

Part II

If the injury occurred when the passenger was boarding or alighting:

16 Passenger car(s) - standing

If the person was walking between cars when the injury occurred then the codes apply:

15 Passenger car(s) – moving  
16 Passenger car(s) – standing

Part III

G1 - Rail Car Door Threshold Plate to Edge of Platform – Gap  
G2 - Area Between Coupled Cars and Platform  
G3 - Area Along Car body, other than Threshold Plate and Platform Edge  
G4 - Car in Vestibule

Event ((block 5l)

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Use the applicable codes.

Tools (block 5m)

1G - Door, End or Side - Passenger Train

2G - Door, Trap - Passenger Train

Cause (block 5n)

18 - Slipped, fell, stumbled due to Gap

It is essential that this code be used for high level passenger boarding platform gap incidents.

### 6.15 Instructions for Completing Form FRA F 6180.55a (Continuation)

<u>Item</u>	<u>Instruction</u>
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- |     |   |
|-----|---|
| 1.  | <u>Name of Reporting Railroad</u><br>Enter the full name of the reporting railroad.   |
| 2.  | <u>Alphabetic Code</u><br>Enter the reporting railroad's code found in Appendix A.  |
| 3.  | <u>Report Month</u><br>Enter the month covered by this report.  |
| 4.  | <u>Report Year</u><br>Enter the year covered by this report.  |
| 5a. | <u>Accident/Injury Number</u><br>Enter the identifying number assigned to the accident/incident causing the casualty. If multiple casualties resulted from a single event, each casualty must have exactly the same report number. If the casualty was a result of a rail equipment accident/incident or a highway-rail crossing impact, the entry must be the same as that shown on the other forms completed for the accident/incident. |
| 5b. | <u>Day</u><br>Enter the day of the accident/incident. Use number day of the month, e.g., 01-31.   |
| 5c. | <u>Time of Day</u><br>Enter the time of the accident/incident, including "a.m." or "p.m." Do not use military time.   |



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- 5d. County  
Enter the county/parish in which the accident/incident occurred.
- 5e. State  
Identify the State in which the casualty occurred, using the appropriate code found in Appendix B.
- 5f. Type Person/Job Code  
Identify the type of person whose injury or illness is being reported by using the following codes (refer to classification of persons found in the definitions in Chapter 2): A - Worker on Duty—Railroad Employee; B - Railroad Employee Not On Duty; C - Passengers on Trains; D - Nontrespassers—On Railroad Property; E - Trespassers; F - Worker On Duty—Contractor; G - Contractor—Other; H - Worker on Duty—Volunteer; I - Volunteer—Other; and J - Nontrespassers—Off Railroad Property.

If the report is for a “Worker On Duty,” i.e., type person/job codes A, F, or H; or the person is an “Employee Not On Duty,” type person code “B;” you must enter the code from Appendix D that best identifies the individual’s occupation/responsibilities.

- 5g. Age  
Enter the age of person whose injury or illness is being reported.
- 5h. Drug/Alcohol Test  
If any employee was tested for alcohol use in connection with this accident, enter the number of positive tests in the box titled “A”. If any employee was tested for drug use in connection with this accident, enter the number of positive tests in the box titled “D”. A test is a physical or chemical reaction by which a substance may be detected or its properties ascertained, and includes both Federal and employer-authorized tests to determine alcohol or drug usage. A test performed under Federal (FRA) requirements is considered positive when the test result has been verified as positive by a medical review officer and reported to the employer. A test performed under other authorization is considered positive when the employer will defend the results if legally challenged. (Refer to 49 CFR Part 219, Control of Alcohol and Drug Use, for additional information.)

If there were positive tests, but impairment is not reported as a cause of the accident, then provide a brief explanation in the Narrative of the basis for this determination. The Narrative is to be used to provide additional clarification, particularly in instances where there are positive test results, but impairment was not determined to have been causal.

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You are required to identify all accidents/incidents where testing was performed. The recording of this data on a record does not mean that the injured person was the individual tested. This situation could occur when the employee(s) tested for the use of these substances was not harmed in the accident/incident. Under these circumstances, since there was no injury to the tested employee, there would be no entry for this employee on Form FRA F 6180.55a. Therefore, it is critical to record the information concerning tests on all reports filed in connection with the accident/incident.

Note: The same drug and alcohol codes should be reported on all corresponding Form FRA F 6180.54s and Form FRA 6180.55a's that are filed under the same accident/incident number.

This situation could arise, for example, when a non-employee, e.g., a passenger, sustains the only reportable injury in an incident that resulted in testing of employee(s). In order to identify the connection between the injury being reported and possible alcohol or drug use by an employee, it is mandatory that the information concerning the alcohol or drug use be recorded on the reports made in connection with the accident/incident.

5i. Injury/Illness Code

Select from the codes in Appendix E the combination that best describes the condition being reported.

5j. Physical Act

From Appendix F, select the code which best describes what the injured person was doing just before the injury occurred. If the code you have selected does not sufficiently describe the "Physical Act," provide further description in the Narrative.

5k. Location The location is comprised of three sets of codes as described below.

**PART I:** Was the person on the right-of-way, off the right-of-way, or on on-track equipment?

Identify the appropriate category describing where the casualty occurred, and enter the appropriate code listed in Appendix F. When using "Other," a narrative must be provided in item 5s.

**PART II:** If the casualty involved on-track equipment, select the code that best describes the type of on-track equipment involved, and enter appropriate code listed in Appendix F. When using "Other," a narrative must be provided in item 5s.

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**PART III:** Select the appropriate code that best identifies the location of the casualty being reported listed in Appendix F. When using “Other,” a narrative must be provided in item 5s.

5l. Event

From Appendix F, select the code that best describes the event or exposure that caused the injury. If the code selected does not sufficiently describe the “Event,” provide further description in the Narrative.

5m. Tools

From Appendix F, select the code that best describes additional information about the tools, machinery, appliances, structures, surfaces, etc., associated with the injury. You should try to use codes that provide additional information. For example, if the event or exposure code identified using “hand tools,” the entry in this block could be used to identify that the tool was a “gripping” type tool. If the code selected does not sufficiently describe the Tools, provide further description in the Narrative.

5n. Cause

From Appendix F, select the code that best describes what caused the event or exposure entered in item 5l. If the code you have selected does not sufficiently describe the “Cause,” provide further description in the Narrative.

5o. Number of Days Away from Work

**See Chapter 6.8.2, Questions and Answers on Days Away from Work, and section on counting days absent from work and days of restriction.**

If the person reported is an employee of the reporting railroad, enter the number of days subsequent to the day of the injury or the diagnosis of the illness that a railroad employee does not report to work, or was recommended by a physician or other licensed health care professional not to return to work, as applicable, for reasons associated with the employee’s condition even if the employee was not scheduled to work on that day. If there were no such days, or a fatality is being reported, enter “0.” If the person is not a railroad employee, enter “N/A.”

5p. Number of Days Restricted

**See Chapter 6.9.1, Questions and Answers on Restricted Work, and corresponding section on counting days absent from work and days of restriction.**

If the person being reported is an employee of the reporting railroad, enter the number of days that an employee is restricted in his or her routine job functions

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following the day of the injury or the diagnosis of the illness, or was recommended by a physician or other licensed health care professional not to return to full time work, as applicable. An employee's routine job functions are those work activities that the employee regularly performs at least once per week. If there were no such days, or a fatality is being reported, enter "0." If the person is not a railroad employee, enter "N/A."

5q. Exposure to Hazmat

Enter "Y" (for "yes") if an exposure to hazardous material caused, or was a contributing factor to, the condition being reported for this individual.

5r. Special Case Codes

**(Classification of Certain Injuries and Illnesses for FRA and/or OSHA Purposes)**

FRA's agreement with OSHA to conform with the new criteria (see Q&A 71 in Chapter 6.10.1, Questions and Answers on First Aid) that went into effect in calendar year 2002 means that some nonfatal cases that were not previously reportable to FRA will now be reportable. Prior to calendar year 2003, only those nonfatal conditions that resulted in actual days away from work, actual work restriction, medical treatment beyond first aid, or loss of consciousness were to be reported. These cases that are now reportable, have been defined as "covered data" cases.

Because of the need to track trends that determine if the safety record for railroad employees is changing, it is necessary to have a means for identifying these previously unreported cases so that the data collected under the new requirements can be accurately compared with earlier years.

If the only reason that a nonfatal condition is being reported is because 1) a physician or PLHCP prescribed time off, but no days were actually taken; 2) a PLHCP prescribed restriction of routine work duties, but restriction of routine work did not occur; or 3) the PLHCP prescribed over-the-counter medication to be taken at prescription strength, then one of the following codes is to be entered in item 5r on Form FRA F 6180.55a.

**A** - PLHCP prescribed time off, but no days were actually taken, and returned to full duty (no restricted days).

**R** - PLHCP prescribed restriction of routine work duties, but restriction of routine work did not occur.

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**P** - PLHCP prescribed over-the-counter medication to be taken at prescription strength, or there was a single external application of prescription medication, e.g., antibiotic ointments or eye drops.

Conditions that result in a single dose of medication that is injected or ingested are not “covered data” cases.

When deciding which code to use when a case involves more than one of the situations above, **A** take precedence over **R** and **P**, and **R** takes precedence over **P**. For example, if the PLHCP recommended days absent from work and restriction of work after returning to the job, then code **A** is to be used.

If code **A** or **R** is used, you must record, at a minimum, a count of one (1) in either block 5o or 5p, that are used for the counting of days.

### *Suicide Data (Suicide or Attempted Suicide Cases)*

**X** - Death of an individual due to that individual’s commission of suicide as determined by a coroner or other public authority; or injury to an individual, which meets reporting criteria, due to that individual’s attempted commission of suicide as determined by a public authority. Only the death of, or injury to, the individual who committed the suicidal act is considered to be suicide data.

When reporting the fatality or injury, enter **X** in block 5r.

### *Termination or Permanent Transfer*

If an employee is terminated or permanently transferred because of physical, medical, or other reasons associated with the reported injury or illness, then enter **Y** in block 5r.

Do not enter code **Y** if the employee is terminated transferred solely for other reasons, e.g., disciplinary, unless the employee’s condition was such, e.g., leg amputated, that it would have resulted in termination or transfer regardless of whether disciplinary action was taken.

### 5s, 5t Latitude and Longitude

Block 5s and block 5t are for recording the latitude and longitude of the location where the incident occurred. These two blocks are optional, and the information to be collected is for Trespasser (Class E) injuries and fatalities not at Highway-Rail Crossings, and for Worker On Duty—Railroad Employee (Class A) fatalities only.

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FRA is using the World Geodetic System (WGS) 84 standard for recording the event's latitude and longitude. Even though this information is optional, it is requested that the information follow the WGS 84 standard.

Although FRA would prefer decimal degrees (on hard copy only, please follow value with <sup>o</sup> to specify decimal degrees), FRA will accept latitude and longitude in degrees, minutes, and seconds (with <sup>o</sup>, ', " to indicate units used are degrees, minutes, seconds) if submitted on hard copy (electronic submissions should be in decimal degrees).

The latitude should use the following format +xx.xxxxxx. The longitude should use the following format -xxx.xxxxxx in decimal degrees. Use an explicit plus or minus sign and an explicit decimal point followed by six decimal places for both latitude and longitude.

Latitude, in decimal degrees: explicit decimal, explicit +/- (WGS 84)  
(e.g., +35.301486)

Longitude, explicit decimal, explicit +/- (WGS 84) (e.g., -085.280201)

5u. Narrative

The railroad may further explain unusual circumstances surrounding a worker's injury or illness using up to 250 characters. Completion of this narrative is mandatory for the reporting railroad unless the injury or illness can be adequately described using all other entries (information blocks) on the form. Do not record in the Narrative personal identifiers, e.g., names, Social Security numbers, or payroll identifications.

### 7. Form FRA F 6180.54 - Rail Equipment Accident/Incident Report

#### 7.1 Requirement.

As set forth in § 225.19(c), rail equipment accidents/incidents are collisions, derailments, fires, explosions, acts of God, or other events involving the operation of railroad on-track equipment (standing or moving) and causing reportable damages greater than the reporting threshold for the year in which the accident/incident occurred must be reported using Form FRA F 6180.54, “Rail Equipment Accident/Incident Report.”

##### 7.1.1 Reporting Threshold

**The reporting threshold is updated annually.** The reporting threshold for calendar years 2002-2005 was \$6,700. The reporting threshold for calendar year 2006 was \$7,700. The reporting threshold for calendar year 2007 is \$8,200. See § 225.19(e). In subsequent years, the railroad reporting officer should check the FRA Safety data Web site for the most current year’s reporting threshold (refer to <http://safetydata.fra.dot.gov/OfficeofSafety> and click on “Changes in Railroad Accident/Incident Recordkeeping and Reporting Info” for updated information.)

##### 7.1.2 Employee Human Factor Reporting and Notification Requirements

If the rail equipment accident/incident is attributed to an employee human factor then the railroad must complete Form FRA F 6180.81, “Employee Human Factor Attachment.” This form must be attached to the Rail Equipment Accident/Incident Report, Form FRA F 6180.54, and submitted to FRA within 30 days after the expiration of the month in which the accident/incident occurred. See 225.21(f). Here, “employee” includes persons classified as Worker On Duty—Employee, Employee not on Duty, Worker on Duty—Contractor, or Worker on Duty—Volunteer. See § 225.5 (“Employee human factor”) and Chapter 8 of this Guide.

When a railroad alleges, in Form FRA F 6180.81, “Employee Human Factor Attachment,” that a specific employee caused or contributed to the rail equipment accident/incident, the railroad must complete FRA Form F 6180.78, “Notice to Railroad Employee Involved in Rail Equipment Accident/Incident Attributed to Employee Human Factor; Employee Statement Supplementing Railroad Accident Report” must also be completed with notice being given to the employee and submission made to FRA and the alleging railroad. See § 225.21(g) and Chapter 9 of this Guide.

##### 7.1.3 Coexistent Reporting Requirements

All casualties resulting from a rail equipment accident, in addition to being recorded on Form FRA F 6180.54, must be reported individually on Form FRA F 6180.55a. If the accident was a highway-rail crossing impact, a Form FRA F 6180.57 must also be completed by the railroad responsible for the consist.

#### 7.2 General Instructions and Interpretations

An accident is frequently the culmination of a sequence of related events, and a variety of

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conditions or circumstances may contribute to its occurrence. A complete record of all of these would be beneficial in accident-prevention analysis. However, it is not practical, even if it were possible, to develop forms and codes that would capture every detail that may be associated with the causes and resulting consequences of each accident. Therefore, the most appropriate combination of available codes that best identifies the likely primary and any contributing cause, and other factors, is to be used.

The limitations imposed by standardized reporting forms make it critical that the narrative portion of the report provide additional information concerning those items that cannot be adequately described on the coded portions of the form. The wide variation in the causes and circumstances of accidents limits our ability to prepare a comprehensive list of items to include in your discussion. We have attempted to identify some of these in the instruction for completing the narrative portion of the report (item 52). In addition to these, you should include any information that increases our knowledge of the underlying reasons why the accident occurred and its consequences.

### ***7.2.1 Identification of Train Accident/Incident***

Each accident/incident must have an identifying number unique within the reporting month. All forms used by a carrier to report a single event must use the same accident/incident number. Do not append additional numbers or letters on different forms for the same accident/incident. For example, if a railroad has two consists involved in an accident, do not report one consist using the reporting number “12345,” and the other consist using the reporting number “12345-A.” The reporting number must be exactly the same on both reports.

### ***7.2.2 Classification of Train Accident/Incident***

The classification of a train accident by type (collision, derailment, other) is determined by the first reportable event in the accident sequence. All reports for a single accident are to use the same designation. For example, if, following a derailment, a train strikes a consist on an adjacent track, the report for this additional consist will indicate that the accident type was a derailment, not a collision.

### ***7.2.3 Calculating Costs***

When final cost figures are not available, estimated values are to be used. If an estimated value was significantly in error, a corrected report must be forwarded. A significant difference is a 10-percent variance between the damage amount reported to FRA and current cost figures.

### ***7.2.4 Joint Operations***

If the property of more than one railroad is involved in an accident/incident, the cost of damages is calculated by including the damages suffered by all of the railroads involved.

When total reportable damage to all railroads directly involved in an accident/incident exceeds the reporting threshold, you must make a report even though your railroad’s damages were



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below the threshold.

In joint operations, if the railroad having track maintenance responsibility did not also have on-track rail equipment involved, the railroad having track maintenance responsibility must submit to FRA a Form FRA F 6180.54 report containing track information. The items concerning the equipment consist are to be marked “N/A.” See § 225.23(c).

Any railroad indicating the involvement of another railroad in the accident on its report must promptly notify the other carrier (FRA may be contacted to obtain telephone numbers). You must exchange information concerning the accident and verify, at a minimum, that:

1. The other railroad has a reporting responsibility;
2. Total reportable damage exceeded the threshold; and,
3. Information contained in both reports is consistent.

When there is disagreement concerning the items being reported, particularly the cause of the accident, each railroad will include a discussion of these in the narrative portion of its report. The back of the form or a separate sheet of paper is to be used when the front of the form is not adequate for this purpose.

### ***7.2.5 Responsibility for Reporting Multiple Consist Accidents***

A form must be completed for each consist (see Chapter 2 for definition) involved in an accident. The railroad responsible for the on-track equipment at the time of the accident, and only that railroad, will report the consist information. See § 225.23(c).

### ***7.2.6 Responsibility for Reporting Accidents on Industry Track***

Track information for accidents occurring on industry track of a non-reporting company is to be reported by the railroad operating the on-track equipment. Damages to industry track and on-track equipment are included in reportable damage. The word “Industry” is to be entered in item 3b to identify an accident of this type.

### ***7.2.7 Reporting Exceptions***

A railroad need not report the following:

1. Cars derailed on industry tracks by non-railroad employees or non-railroad employee vandalism, providing there is no involvement of railroad employees;
2. Damage to out-of-service cars resulting from high water or flooding, e.g., empties placed on storage or repair track. This exclusion does not apply if such cars are placed into a moving consist and as a result of this damage, a reportable rail equipment

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accident results.

Suicides and attempted suicides are not exceptions to FRA's reporting requirements and must be reported to FRA as "suicide data." Accidents and incidents caused by suicide or attempted suicide are NOT excepted from FRA's reporting requirements.

*Suicide data* is data regarding the death of an individual due to that individual's commission of suicide as determined by a coroner or other public authority; or injury to an individual due to that individual's attempted commission of suicide as determined by a public authority. Only the death of, or injury to, the individual who committed the suicidal act is considered to be suicide data.

See instructions for completing Blocks 38, 46-48, and 52 of Form FRA F6180.54 under section 7.3 below.

### 7.3 Instructions for Completing Form FRA F 6180.54

Note: Enter "N/A" for those items that do not apply to an accident, or for those items describing on-track equipment that is the reporting responsibility of another railroad. All items must have an entry; do not leave items blank. If "none" is the proper response to an item (for example, the number of cars releasing hazardous material), then enter "0," not "N/A."

<u>Item</u>	<u>Instruction</u>
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- |     |   |
|-----|---|
| 1.  | <u>Name of Reporting Railroad</u><br>Enter the full name of the reporting railroad.   |
| 1a. | <u>Alphabetic Code</u><br>Enter the reporting railroad's alphabetic code found in Appendix A.   |
| 1b. | <u>Railroad Accident/Incident No.</u><br>Enter a unique identifying number for the accident/incident being reported. All reports prepared in connection with this accident/incident must use the same reporting number. The report number may contain up to 10 numbers or alphabetic characters.  |
| 2.  | <u>Name of Other Railroad or other Entity with Consist Involved</u><br>If an equipment consist operated by another railroad or other entity was involved in the accident, enter the full name of that railroad or other entity. If more than one other railroad or other entity had a consist involved, list only one name; include in the narrative portion of the form a reference to all railroads and other entities and the extent of their involvement. Be sure that any other railroad or other entity identified in the report is notified. |

The exception is when there are three railroads involved (or two railroads and one industry), then item 2 can be completed with the name of the Railroad or other

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entity without having a consist involved.

- 2a. Alphabetic Code  
Enter the alphabetic code of the railroad or other entity identified in item 2, as found in Appendix A.
- 2b. Railroad Accident/Incident No.  
Enter the reporting number used by the railroad or other entity shown in item 2 to identify this accident/incident.
3. Name of Railroad or other Entity Responsible for Track Maintenance  
Enter the name of the railroad or other entity responsible for maintaining the track on which the accident/incident occurred.
- 3a. Alphabetic Code  
Enter the alphabetic code of the railroad, or other entity identified in item 3.
- 3b. Railroad Accident/Incident Number  
Enter the reporting number used by the railroad shown in item 3 to identify this accident/incident.
4. U.S. DOT Grade Crossing Identification Number  
If the event being reported is a highway-rail crossing impact, enter the DOT crossing identification number. (Note: The railroad responsible for the on-track equipment involved in the impact must also complete a Form FRA F 6180.57. This report must have the same report number as that used on Form FRA F 6180.54.)
5. Date of Accident/Incident  
Enter the date of the accident/incident.
6. Time of Accident/Incident  
Enter the time the accident/incident occurred and check the appropriate “a.m.” or “p.m.” box. Do not use military time.
7. Type of Accident/Incident  
Identify the first event in the accident/incident from the list of codes on the form. The same code is used for all reports filed for the accident.
8. Cars Carrying HAZMAT [Hazardous Material]  
If the equipment consist for which this report is being prepared contained cars which are designated as transporting hazardous material, enter the total number of these cars, including residue cars. If there were no such cars in the consist, enter a “0.” If the report is for track involvement only, enter “N/A.” The entry in this item cannot be greater than the total number of freight cars shown on line 1 of

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item 35.

9. HAZMAT Cars Damaged/Derailed

If the entry in item 8 is greater than or equal to 1, enter the total number of hazardous material cars that were damaged or derailed. If none, enter “0”; otherwise, enter “N/A.” The number of cars in item 9 cannot exceed the number of cars listed in item 8.

10. Cars Releasing HAZMAT [Hazardous Material]

If any of the hazardous material cars counted in item 8 released any portion of its contents, including fumes, enter the count of these cars. If none, enter “0”; otherwise, enter “N/A.” This number cannot be greater than that shown in item 8. Describe the hazardous material released in the narrative by name or the Standard Transportation Commodity Code (STCC). (Note: Any release of hazardous material must also be reported on DOT form F 5800.1 See 49 CFR 171.15 and 171.16 for requirements.)

11. People Evacuated

If the accident/incident resulted in an evacuation of the area because of an actual or a potential exposure to hazardous material, enter the number of persons evacuated. This number is to be reported only by the railroad responsible for the equipment consist involved.

If there were multiple consists involved in the accident, the total number of people evacuated is to be shown on the report for the consist most directly responsible for the evacuation. Precautionary evacuations and instances where it was later established that a release of hazardous material did not occur are to be reported.

12. Subdivision

Enter the full name of the subdivision on which the accident occurred, i.e. the Track owner’s subdivision name. If the railroad is not so divided, enter the word “System.” In the event of a joint accident involving Amtrak, the host railroad’s subdivision will apply.

Note: If an accident occurred in a major terminal and subdivision is not applicable, enter terminal/yard name.

13. Nearest City/Town

Enter the name of the nearest city or town.

14. Milepost

If the accident occurred on a main line, branch line, or siding, enter the milepost number, to the nearest tenth of a mile, at the location of the accident. If mileposts are not used, enter “N/A.”

15. State Abbr.

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Enter the appropriate State abbreviation and code, from Appendix B of this Guide.

16. County  
Enter the full name of the county or parish in which the accident occurred.
17. Temperature  
Enter the temperature (Fahrenheit) at the accident site at the time of the accident. If the temperature was below zero, preface the temperature number with a minus (-) symbol.
18. Visibility  
Select the most appropriate entry, and place in the code box. Make sure this entry does not contradict the time given in item 6. For example, if the time of the accident was 1:30 p.m., it would be incorrect to code the visibility as “Dawn.”
19. Weather  
Select the most appropriate weather condition at the time and location of the accident, and enter the code in the box provided.
20. Type of Track  
The host railroad (railroad responsible for track maintenance) will determine/provide the type of track. Any other railroad should consult with the host railroad when completing this block. Select the code that identifies the type of track on which the accident occurred, and enter it in the box provided. Branch lines should be reported as main line, code “1.”
21. Track Name/Number  
Enter the name or number used to identify the track on which the accident occurred. If it is a main track of a single-track line, enter “single main track.”
22. FRA Track Class  
Enter the class of track on which the reported consist was located at the time of the accident. Classes of track are defined in the Federal Track Safety Standards (49 CFR Part 213). Excepted track should be entered as Class “X”.

### Maximum Speed

<u>Track Class</u>	<u>Freight Trains</u>	<u>Passenger Trains</u>
X	10	Prohibited
1	10	15
2	25	30
3	40	60
4	60	80
5	80	90

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6	110	110
7	125	125
8	160	160
9	200	200

23. Annual Track Density

If an accident occurred on a main track, enter the annual gross tonnage (in millions) over this track; otherwise, enter “N/A.”

24. Time Table Direction

If the consist identified on this report was either moving or temporarily stopped, enter the code which describes the time table or schedule direction. If the equipment consist was a car or a cut of cars standing on the track, enter “N/A.”

25. Type of Equipment Consist

Select the code that best identifies the consist for which this report is being prepared, and enter in the box provided. Be sure that this entry is consistent with the values given in items 34 and 35.

For example: the codes “1,” “2,” “3,” “7,” “8,” “B,” and “C” are used for consists that contain a locomotive unit. Therefore, line 1 of item 34 must show at least one locomotive in a box. If the code for a freight train is used, then line 1 of item 35 must show loaded and/or empty freight cars. If the consist is a single car or cut of cars, there cannot be locomotives shown in item 34, and there must be a car count shown in item 35. Many such comparisons exist; be sure to check the interrelationship of information contained in all items related to the equipment consist.

Under the current FRA Guide (Effective May 1, 2003) the codes for “Type of Equipment Consist” are as follows:

Current codes:

1. Freight train
2. Passenger train
3. Commuter train
4. Work train
5. Single car
6. Cut of cars
7. Yard/switching
8. Light loco(s)
9. Maint./Inspect. car

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### A. Spec. MoW Equip

Under the proposed Guide, the values of the codes will be:

1. Freight train
2. Passenger train - Pulling
3. Commuter train - Pulling
4. Work train
5. Single car
6. Cut of cars
7. Yard/switching
8. Light loco(s)
9. Maint./Inspect. Car
- A. Spec. MoW Equip
- B. Passenger train - Pushing
- C. Commuter train - Pushing
- D. EMU
- E. DMU

26. Was Equipment Attended?

If the equipment consist was attended by an employee, enter "1"; otherwise, enter "2."

27. Train Number/Symbol

If the equipment consist can be identified by means of a train number, enter that train number. Otherwise, enter the number of the locomotive unit from which the engineer was controlling the consist. If the consist for which this report is being prepared did not contain a locomotive, enter "N/A."

28. Speed

List the speed (mph) at which the consist was traveling at the time of its involvement in the accident. Enter "E" in the code box to indicate if this is estimated; or enter "R" for a recorded speed. If this consist was stopped, enter a speed of "0."

29. Trailing Tons

If the equipment consist reported on this form is a freight train, work train, etc., enter the gross tonnage, excluding locomotives, of the train. Enter "N/A" if the consist was a passenger train (pulling/pushing), commuter train (pulling/pushing), light locomotive(s), car(s), EMU, DMU, or a locomotive handling cars in switching operations.

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30. Type of Territory

The host railroad (railroad responsible for track maintenance) will determine/provide the Type of Territory. Any other railroad should consult with the host railroad when completing this block. Identify the method(s) of railroad operation at the accident location by entering the appropriate code(s) in the boxes. The back of the form may be used if necessary. The specific instructions for completing this block are dependent on block 20 (Type of Track). There are up to five codes available to be used. Refer to Appendix J for specific instructions.

30a. Remotely Controlled Locomotive?

If this consist is NOT a part of a remote controlled operation or is NOT being controlled by a remote control locomotive (RCL), enter code "0." For accidents involving consists controlled by RCL, enter one of the following three available codes that best describes the type of remotely controlled operation involved:

- 1 - Remote control portable transmitter
- 2 - Remote control tower operation
- 3 - Remote control portable transmitter - more than one remote control transmitter.

The use of codes "1," "2," or "3" is not dependent upon whether the RCL operation caused or contributed to the accident, only that the RCL was in use. Further explanation can be provided in the narrative.

There are special instructions for blocks 40-45 for coding if the consist was under RCL operations.

31. Principal Car/Unit

31a. Initial and Number

In the upper box ("First Involved"), list the initial and number of the first locomotive or car in the consist being reported.

If the consist was moving at the time of the accident, and the accident was caused by a mechanical or an electrical failure on this consist (cause codes beginning with "E"), enter the initial and number of the car or locomotive having the defective equipment in the lower box ("Causing"). If a mechanical or electrical failure on a locomotive or car in this consist did not cause the accident, enter "N/A".

The same entry will frequently appear in both upper and lower boxes, since the locomotive or car with the mechanical or electrical failure will also be the first involved. If the locomotive or car that caused the accident was contained in a different consist than the one described in this report, do not identify it on the



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report for this consist. A reference to the unit causing the accident may be made in the narrative portion of the report.

### 31b. Position in Train

In the upper box, enter the position within the consist of the locomotive unit or car identified in the upper box of item 31a. When the consist contains a locomotive, count from and include the first locomotive unit. If the consist was a moving cut of cars, count from the leading end of the consist. If the consist was a single locomotive or moving car, enter "1." If the consist was a standing car or a standing cut of cars, enter "N/A."

If a locomotive unit or a car is identified in the lower box of item 31a, enter its position in the lower box. Use the procedure described above.

Note: When entering the position of the car or locomotive in either box, be sure that this value does not exceed the total length of the consist. This is determined by adding the total number of locomotives in line 1 of item 34 to the total number of cars shown in line 1 of item 35.

### 31c. Loaded

When the entry in the upper box of item 31a identifies a car, indicate if this car was loaded or unloaded by entering "Yes" or "No" in the upper box. If a car is not identified in item 31a, enter "N/A".

If a car is identified in the lower box of item 31a, indicate if this car was loaded or unloaded by entering "Yes" or "No" in the lower box. Otherwise, enter "N/A".

### 32. Railroad employees tested for drug/alcohol use.

If any employee was tested for alcohol usage in connection with this accident, enter the number of positive tests, in the first block. If any employee was tested for drug usage in connection with this accident, enter the number of positive tests, in the second block. If testing was performed and the results were negative, enter "0." **If there were positive tests, but impairment is not reported as a cause of the accident, then provide a brief explanation in the narrative of the basis for this determination.** You are required to identify all accidents/incidents where either Federal or employer-authorized tests were performed.

Note: The same drug and alcohol code should be reported on all corresponding Form FRA 6180.54's and Form FRA 6180.55a's that are filed under the same accident/incident number.

49 CFR 225.18(a)(2) specifies that for any train accident within the requirement for post-accident testing under § 219.201, the railroad shall append to the Rail Equipment Accident/Incident Report any report required by § 219.209(b) (pertaining to failure to obtain samples for post-accident toxicological testing).

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33. Was this consist transporting passengers?  
Enter “Y” (for “yes”) if the consist being reported on was transporting passengers; otherwise enter “N” (for “no”).
34. Locomotive Units [Number of] (Exclude EMU, DMU, and Cab Car Locomotives)  
On line 1 (“Total in Train”), enter in the appropriate box(es) the number of locomotive units in this consist. If there were no locomotives in this consist, enter “0” in each of the boxes. Refer to the definition for “Locomotives” in Chapter 2 (Definitions).

For the locomotives shown in line 1, list on line 2 (“Total Derailed”) the number of these that were derailed in the accident. Include locomotives that derailed following a collision, explosion-detonation, etc., as well as those accidents identified as derailments in item 7.

35. Cars [Number of] (Include EMU, DMU, and Cab Car Locomotives)  
On line 1 (“Total in Equipment Consist”), enter in the appropriate box(es) the number of cars contained in the consist. A passenger car is considered loaded if it contains one or more passengers. Enter “0” in all boxes if the consist did not contain cars. (Refer to the definition for “EMU, DMU, and Cab Car Locomotives” in Chapter 2 (Definitions)).

For the cars shown in line 1, list on line 2 (“Total Derailed”) the number of these that were derailed in the accident.

Special Instruction: When the consist contains articulated car(s), the count for these is to be the number of platforms/units in such a car. This is necessary in order to maintain comparability of train lengths. The narrative is to contain a reference that articulated cars were included in the consist.

36. Equipment Damage This Consist  
Enter the amount of reportable damage sustained by the equipment consist for which this report is being prepared. If this consist did not have reportable damage, enter “0.” When multiple forms are being used, do not show the damage to this consist on other reports.

When estimating damage costs, the labor costs to be reported are only the direct labor costs to the railroad, e.g., hourly wages, transportation costs, and hotel expenses. The cost of fringe benefits is excluded when calculating direct labor costs. Overhead is also excluded when calculating damage costs due to the unacceptable non-uniform treatment of overhead under the current process. If the railroad chooses to have employees work overtime, then the overtime direct labor charges must be used.

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For services performed by a contractor, a direct hourly labor cost is calculated by multiplying the contractor's total labor hours charged to the railroad by the applicable direct hourly wage rate for a railroad worker in that particular craft. However, if a railroad cannot match the equivalent craft to the labor hours spent by a contractor, then the railroad must use the loaded rate, i.e., the cost by hour for labor, fringe benefits, and other costs and fees for services charged by the contractor for the tasks associated with the repair of the track, equipment, and structures due to the train accident.

The current method used to calculate material costs, i.e., depreciated value estimates, will continue to be used by all railroads. See Chapter 2, Definitions, *Costs and Reportable Damage*, for methodology of calculations.

If a railroad chooses to use parts from older equipment to repair a damaged car from an accident, then fair market value for the old part should be used and documented as to fair market value (documentation should be publicly available source for refurbished equipment). FRA is concerned that the railroad pay special attention to using refurbished parts that might affect safety.

### 37. Track, Signal, Way & Structure Damage

The railroad responsible for maintaining the track on which the accident/incident occurred will enter the cost of damages to the track, signals, roadbed, track structures, etc. (A report must be provided even when the track damage is zero (0).) Other railroads will enter "N/A." If the railroad responsible for the track maintenance is filing reports for multiple consists involved in the accident, only one of these reports will contain the total damage incurred.

If a railroad uses rail salvaged from an abandoned track or track no longer in use, then the cost of the rail and ties salvaged are zero; however, the direct labor costs for salvaging the rail and ties, building the panels and replacing the rail (including subsequent welding costs if continuous welded rail (CWR) must be used in calculating the costs of the accident.

### 38. Primary Cause Code

Proper entry of the correct primary cause code is of critical importance, not only for the accident being reported, but also for FRA's analyses conducted for accident prevention purposes. Because of the extensive use made of primary cause code entries, careful attention must be given to making correct entry for all accidents.

From the cause descriptions found in Appendix C, enter the cause code that best describes the primary cause of the accident. All reports by a single railroad for a single accident must use the same cause code. When multiple railroads are reporting the same accident, they should attempt to resolve any differences concerning the cause prior to reporting. When this cannot be accomplished, each railroad will identify what it considers to be the primary cause of the accident.

If none of the more specific available cause codes are appropriate, you may enter cause code **M599**, “Other Miscellaneous Causes,” and fully describe the circumstances in the narrative. By its very nature, M599 is a vague cause code that is intended to allow for a cause code entry for accidents that involve extremely unusual circumstances, and thus are not described elsewhere in Appendix C. Railroads should avoid unnecessary usage of this vague cause code as it detracts from FRA’s ability to accomplish proper train accident cause trend analysis for accident prevention purposes. Often, the use of cause code M599 can be avoided by using both the primary and contributing cause fields to enter the most appropriate specific available cause codes. (Example: For an accident caused by a worn flange (E64C) and a worn switch point (T314), rather than using M599, the railroad should make a determination which was the primary cause, and which was the contributing cause, and make entry of these specific cause codes.)

If the cause of the accident is still under active investigation by the railroad when the report is due, you may enter **M505**. Active investigation by the railroad means that the railroad’s investigation of the accident is still ongoing, and the cause has not been fully determined. An example of an accident still under active investigation by the railroad would be that the railroad is still awaiting metallurgical results for a suspected broken rail. Often, FRA and/or the National Transportation Safety Board (NTSB) may also be performing their own independent investigations of this same accident, and their final reports may not be published for a considerable time period after the accident. The railroad must not wait for either the FRA or the NTSB to publish their findings and their assessment as to cause(s) of the accident to amend cause code M505. Once the railroad has completed its active investigation and determined the probable cause(s), the best available appropriate cause code(s) must be provided to FRA on an amended report for the accident. This must be accomplished in all cases no later than April 15 of the year following the year in which the accident occurred, unless the railroad’s investigation of the accident is still active. The fact that NTSB or any other governmental agency has not released their findings as to probable cause is not a valid reason for railroads to allow cause code M505 to remain assigned to an accident.

Cause code **M507** is used to denote accidents/incidents in which the investigation is complete but the cause of the accident/incident could not be determined. If a railroad uses this code, the railroad is required to include in the narrative block an explanation for why the cause of the accident/incident could not be determined.

### **Suicide and attempted suicide.**

Place the following Miscellaneous Cause Codes, as applicable, in block 38:

(i) Code M309 “Suicide (Highway-Rail Grade Crossing Accident)”; (ii) Code M310 “Attempted Suicide (Highway-Rail Grade Crossing Accident)”; (iii) Code M509 “Suicide (Other Misc.)”; and (iv) Code M510 “Attempted Suicide (Other

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Misc.)”. These codes can be found in Appendix C, “Train Accident Cause Codes” of this Guide. When entering code for Suicide and Attempted Suicide (M309, M310, M509, M510), as determined by a coroner or public authority, such as public police officer, if there is also alcohol or other drug involvement, then enter, as the Primary Cause Code, either M309, M310, M509, or M510, as applicable, and also indicate other applicable code in the contributing code box. For example, if causes of Highway-Rail Grade Crossing Accident are both attempted suicide and drug or alcohol impairment, enter “M310” for Primary Cause Code, and enter “M301” for Contributing Cause.

If an accident is caused by a bond wire attachment issue (See proposed Appendix C, Train Accident Cause Codes), information on the methods and locations of these attachment(s) are to be provided in the narrative (block 52).

There is a 5-year limit on the railroads to send in an amended report to change a cause code. See Chapter 1 of this Guide. Once the FRA or NTSB has published its findings on an accident, the railroad may choose to send in another amended report to reflect the primary cause code as determined by FRA or NTSB. The railroad is not bound by the findings of either FRA or NTSB, as long as the railroad has made a “good faith” determination that the results of their investigation and analysis are accurate.

### 39. Contributing Cause Code

If there were one or more contributing causes, enter the code for the foremost contributing cause. Otherwise, enter “N/A”. An accident is frequently the culmination of a sequence of related events, and a variety of conditions or circumstances may contribute to its occurrence. A complete record of all of these would be beneficial in accident prevention analysis. However, it is not practical, even if it were possible, to develop forms and codes that would capture every detail that may be associated with the causes and resulting consequences of each accident. Therefore, the most appropriate combination of available codes that best identifies the likely primary and any contributing cause, and other factors, is to be used. Railroads are encouraged to use the Contributing Cause Code. When the events cannot be adequately described using the Primary and Contributing Cause, the railroad must use the Narrative block to complete the causes of the accident.

### 40-43. Number of Crew Members

Enter in the appropriate boxes the total number of crew members on the consist for which this report is being filed. If the item does not apply, enter “N/A.”

The operator of on-track maintenance machines is to be included in the “Engineer” count.

A switch foreman is to be included in the “Conductor” count.

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Switch helpers are to be included in the “Brakeman” count.

Utility employees who were attached to the crew at the time of the accident are to be included in the count for the most appropriate type of crew member (normally brakeman.)

If, through contractual agreements, a railroad has eliminated the job title of conductor, and those responsibilities previously discharged by a conductor are being fulfilled by another job title on the consist, then an entry is to be included in the “Conductor” count.

If block 30a, “Remote Control Locomotives” has a code of 1 or 2, and the consist was under RCL operations then record the RCL operator in the “Engineer/Operator” count, regardless of the operator’s craft. If block 30a, “Remote Control Locomotives” has a code of 3 and the consist was under RCL operations, then record all of the RCL operators in the “Engineer/Operator” count, regardless of the operator’s craft.

### 44-45. Length of Time on Duty

Show the length of time that the engineer/operator and conductor in charge of the equipment consist had been on duty at the time the accident/incident occurred.

If block 30a, “Remote Control Locomotives,” has a code of 1 or 2 and the consist was under RCL operations, then record the RCL operator’s length time on duty in the “Engineer/Operator” block regardless of the operator’s craft.

If block 30a, “Remote Control Locomotives,” has a code of 3, “Remote control portable transmitter - more than one remote control transmitter,” and the consist was under RCL operations, then record all of the RCL operators in the “Engineer” and “Conductor” fields regardless of the operators’ craft. If there are more than two RCL operators, then choose the two operators that have the longer tour of duty to record in the “Engineer” and “Conductor” blocks.

### 46-48. Casualties

Enter the total number of reportable casualties (fatalities and nonfatalities) on this consist. If none, enter “0.”

Enter the total number of persons who sustained reportable injuries while on board, or as a result of striking, being struck by, or who are otherwise hurt in connection with the operation of this consist. This would include injuries to individuals who jumped from the consist prior to the accident. Do not report employees of another railroad.

Include suicides and attempted suicides, as determined by a coroner or other public authority, in boxes 46-48, as applicable. (Prior the effective date of this guide, suicides were not included in Items 46-48).

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Note: All nonfatal casualties, including those being reported as occupational illnesses, in the case of hazardous material releases, are to be included.

Each casualty reported on this form, regardless of whether fatal or nonfatal, must be reported individually on Form FRA F 6180.55a using the same accident/incident report number in item 1b. Enter the number of fatal and nonfatal casualties to the railroad's employees, train passengers, and others.

### 49. Special Study Block

A "Special Study Block" (SSB) is for collection of information on specific accident issues over a specified time period in response to particular hazards or associated railroad risks that are of safety concern. FRA will notify the railroads in writing or, if appropriate, through publication in the Federal Register, of the purpose and the type of information that is to be collected

Special Study Block for Item 49 will be broken down into SSB A (49a) and SSB B (49b):

### 49a. Special Study Block A

Use this block to indicate what type of track an accident/incident occurred on by using the codes "CWR" for continuous welded rail track, or "OTH" for other. Item 49a cannot be blank.

### 49b. Special Study Block B

Special Study Block B will be used to collect information on specific accident issues as explained above, and if appropriate, through publication in the Federal Register.

Please refer to <http://safetydata.fra.dot.gov/OfficeofSafety> and click on "Changes in Railroad Accident/Incident Recordkeeping and Reporting Info" for updated information.

### 50-51. Latitude and Longitude

Block 50 and block 51 are for recording the latitude and longitude of the location where the accident occurred. These two blocks are optional.

FRA is using the World Geodetic System (WGS) 84 standard for recording the event's latitude and longitude. Even though this information is optional, it is requested that the information follow the WGS 84 standard.

Although FRA would prefer decimal degrees (on hard copy only, please follow value with ° to specify decimal degrees), FRA will accept latitude and longitude in degrees, minutes, and seconds (with °, ', " to indicate units used are degrees, minutes, seconds) if submitted on hard copy (electronic submissions should be in decimal degrees).

The latitude should use the following format +xx.xxxxxx. The longitude should use the following format -xxx.xxxxxx in decimal degrees. Use an explicit plus or minus sign and an explicit decimal point followed by six decimal places for both latitude and longitude.

Latitude, in decimal degrees: explicit decimal, explicit +/- (WGS 84) (e.g., +35.301486)

Longitude, explicit decimal, explicit +/- (WGS 84) (e.g., -085.280201)

### 52. Narrative Description

A detailed narrative is basic to FRA's understanding of the factors leading to, and the consequences arising from, an accident. While many minor accidents can be described in a few brief comments, others are more complicated and require further clarification.

An adequate description of most accidents cannot be made in the limited space available in block 52. The narrative can be continued on a separate sheet of paper attached to the report. Because of the variety of factors associated with accidents, it is not possible to give a comprehensive list of items you should include in your discussion. However, the following are to be covered when appropriate:

Drug/alcohol involvement. Include a discussion of any drug/alcohol use connected with this accident. If positive tests were made, but usage/impairment was not determined to be a causal factor, explain the basis of this determination.

Cause. Discuss any event(s) or circumstance(s) occurring prior to the accident that has relevance to the accident. Provide additional information concerning the reasons(s) for the accident when the causes found in Appendix C do not sufficiently explain why the accident occurred.

Diesel Fuel Tank. Identify any leakage of locomotive diesel fuel resulting from the accident. Identify the unit(s) by initial and number, the manufacturer and model designation, the capacity of the fuel tank, the quantity of fuel released, and any consequence of the release. (Was there a fire, environmental consequences, etc.?)

Hazardous Materials. Identify the initial and number of any car releasing hazardous material. List the name and indicate the quantity of hazardous material released. Report the number of fatalities and injuries resulting from a direct exposure to the released substance. If there was an evacuation, estimate the size



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of the affected area and the length of the evacuation.

Train Information. Identify any special characteristics of the consist being reported, e.g., unit coal train; comprised of articulated cars.

Unusual Types of Territory. Include any unusual types of territory that could not be described in Block 30.

Other Railroads. Describe how and to what extent the on-track equipment of other railroads became involved in the accident.

Bond Wire Attachment(s). If an accident is caused by a bond wire attachment issue, provide information on the methods and locations of these attachment(s).

**Do not record in the Narrative personal identifiers, e.g., names, Social Security Numbers, payroll identifications.**

53. Typed/Printed Name and Title of Preparer  
Type or print the name and title of the person responsible for preparing this report form.

54. Signature  
Signature of the person shown in item 53.

Note: If Form FRA F 6180.54 is to be submitted electronically, signature (item 54) and date of signature (item 55) are not required.

55. Date  
Date the signature was made in item 54 (i.e., the date the form was initially completed).

### 7.4 Questions and Answers on Rail Equipment Accident Reporting

**Q1. Another railroad derailed some cars on our track. The damage to our track did not exceed the threshold; however, their cars had extensive damage and the cost to repair/replace these exceeded the threshold. Do we need to complete a report for our railroad since we did not have significant damage to the track?**

A1. Yes. The criterion for reporting is whether or not the total reportable damages for all railroads having on-track equipment, track, signals, etc. involved in the accident exceeded the threshold. You indicated that the equipment damage by itself exceeded this amount. Therefore, you must complete a report, but limit the damage you record to the amount required to repair/replace your damaged track.

FRA uses the information received from all railroads to obtain a clearer picture of what caused the accidents and what the consequences were.

**Q2. A passenger train was en route between stations. A component failure and the resulting electrical arching between the third rail and a collector plate caused a traction motor to burn out. The train came to a stop as smoke and fumes entered the passenger compartment. The passengers were evacuated; however, there were no reports of injury. The repair and replacement of damaged components will exceed the threshold. Is this a reportable train accident?**

A2. Yes. The regulation requires that any event involving the operation of on-track equipment and resulting in damage above the reporting threshold is to be reported. However, a component failure is not reportable when the physical damage is confined to the component and there are no other consequences of a reportable nature. Take, for example, the following scenario: a traction motor problem is detected by the engineer. She is able to cut out that motor and proceeds to the next terminal where the unit is removed from service and the traction motor replaced at a cost exceeding the threshold.

Crankcase explosions, turbo charger failures, and incidents involving catenaries must meet this same general criterion to be reportable. For example, a crankcase explosion extensively damages the block, crankshaft, and oil pan. A subsequent fire causes additional damage to other components in the engine compartment. The train is unable to proceed, and crew members suffer from smoke inhalation. An event such as this, or a turbo charger explosion with similar consequences, will generally be reportable.

**Q3. Sometimes damage to equipment is discovered during an inspection, but it cannot be determined how the damage occurred, or it may simply be the result of routine wear and tear. If the cost of repairing or replacing the component(s) exceeds the threshold, do we need to make a report?**

A3. No. The equipment in this example was not in operation when the damage was detected. In addition, it is unlikely that a factual report could be prepared that would adequately describe how the damage occurred. Such a report, missing vital information, would be of little use in accident analysis.

**Q4. A shipment of cars was dropped off and secured at an industry siding. Employees of the industry were attempting to move one of the cars when it got away from them, struck a derail, rolled over on its side, and sustained substantial damage. The industry's railroad operations are confined to its own installation, which is completely off general system. The car did not leave the industry's property or foul the track maintained by my railroad. Do we need to report this event?**

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- A4. No. The event described was not caused by, nor did it involve, the operation of your railroad. The industry does not have to report the event to FRA because the industry is considered a plant railroad that operates entirely off the general system. Part 225 does not apply to plant railroads that operate entirely off the general system. See § 225.3.
- Q5. A unit coal train was returning with 115 empties when it was delayed due to a heavy downpour that stopped all rail operations. The crew was removed from the train because of the extreme weather conditions. Heavy flooding from the rain washed out a portion of the main line track that the train was occupying. The next morning, 28 cars were on their sides. The preliminary estimate of equipment damage alone is over \$100,000. Is this a reportable train accident?**
- A5. Yes. The regulation requires that any event, including acts of God, involving the operation of on-track equipment (standing or moving), and causing damage above the threshold for train accidents must be reported.
- Q6. Our switch crew was switching an industry when the wind blew the industry gate into the side of a car being shoved. The industry gate was destroyed. Would this be considered as a track structure? Please elaborate more specifically concerning which structures would or would not be included in railroad track damage.**
- A6. The damages to an industry-owned gate would not be considered as railroad track damage. Additionally, if an accident resulted in damages to the door of a roundhouse, diesel shop, or repair shop, none of these would be considered as track structures, and thus would not be considered as track damage. Should a train strike and damage a platform used for loading and unloading passengers, this type of structure is not an integral part of the track structure, and also would not be considered as track damage. On the other hand, should a derailment result in damages to a signal bungalow located adjacent to a track, this would be considered as track damage, as it is an adjunct to the track. For this same reason, damage to tunnels, bridges, snow sheds, or other track-related structures would be considered as track damage.
- Q7. Do costs for re-railing equipment contribute to the total costs of the rail-equipment accident?**
- A7. This cost is part of the “cost of clearing wrecks,” which is generally excluded from the calculation of “reportable damage.” Chapter 2, page 8 of this Guide explains reportable damage.
- Q8. A rail-equipment derailment occurred on railroad property in July. Only one car was damaged, with less than \$50 of track damage. The railroad made a good faith estimate that the damage to the car was \$4,000. The FRA**

**Form F 6180.97 was completed. The damaged railroad car was taken to a repair facility, but no repairs were made until 14 months later. During the repair, other damage related to the derailment was discovered, and now the event is reportable. Should the railroad file the late report? What other considerations should be made? Does the requirement for completing and mailing FRA Forms F6180.81 and F6180.78 for cases involving a human factor cause still apply?**

- A8. The derailment should be reported to the FRA regardless of when the determination was made using the FRA Form F6180.54, “Rail Equipment Accident/Incident Report.” In the case of rail equipment accidents/incidents, the determination of whether the combined railroad equipment and track damage costs exceed the current threshold limit can be determined relatively promptly, and in most cases, sufficiently accurate. Typically, this is accomplished by estimates provided by qualified mechanical and track department supervisors on the individual railroads.

However, FRA does recognize that in some cases, the actual costs to repair a damaged piece of railroad equipment may greatly exceed the estimated cost, and this may elevate a previously non-reportable rail equipment accident over the threshold and become reportable at a later date. This most likely to occur when a privately owned freight car is damaged and is sent back to the owner for repairs. In these cases, a report must still be prepared by the railroad company regardless of the time between date of the accident/incident, and the date when knowledge is received rendering the accident/incident reportable. A letter of explanation as to why the report is filed late must be submitted.

There are no provisions in the FRA Guide that would allow a railroad to dispense with the requirement for completing and mailing FRA Forms F6180.81 to FRA, and part I of FRA Form F6180.78 to the appropriate employee(s) for cases involving a human factor cause that are late reported. The regulation and FRA Guide are clear with respect to the necessity that these forms be completed for all cases involving a human factor primary and/or contributing cause code. The fact that a rail equipment accident/incident is reported late does not in any way relieve the railroad from compliance with these provisions. Even if you should find, through mistake or otherwise, a reportable rail equipment accident/incident occurred 2 or even 3 years ago, and had not been previously reported, a late report is required by FRA. If that accident/incident involved a human factor primary and/or contributing cause code, then the completion of FRA Forms F6180.81 and F6180.78 would also still be required. Although the employee(s) involved may question the delay involved, the named employee(s) still will have the opportunity to offer any statement(s) concerning the validity of the railroad’s report. This is the intent of the regulation; that is, that the employee’s statement is made a part of the accident reporting process.

- Q9. Our railroad had some historical equipment damaged, which cannot be repaired or replaced in-kind. The equipment is worth substantially more than the depreciated value. What should be used for the estimated equipment costs?**
- A9. Antique value of passenger rail cars is very difficult to estimate. Railroads should attempt to discern a fair market price for the equipment that cannot be replaced.
- Q10. If a system car is destroyed and the car is under 30 years of age, what method should be used to report damages: 1) the straight depreciated value of the car, or 2) the depreciated value, minus the scrap value, plus the dismantling costs?**
- A10. Only item (1) can be used. Chapter 2 shows a straight-line method for depreciating destroyed equipment. Even with equipment that is 30 years old, there is a 10 percent value that would include the scrap value.
- Q11. Our crew was shoving 29 cars into a yard track, and a member of the crew was on the ground for the purpose of protecting the shove. The crew member failed to note that a switch was improperly lined. The lead car entered the adjacent track, striking a standing car, derailling it and the lead car of the shoving movement. What would be the proper method of cause assignment for this type of accident?**
- A11. There are detailed instructions found in Chapter 7 for completing Item 38, “Primary cause code,” and Item 39, “Contributing Cause Code,” on FRA Form F 6180.54, Rail Equipment Accident/Incident Report. These instructions are also applicable to entries into Item 28, “Primary Cause,” and Item 29, “Contributing Cause,” on FRA Form F 6180.97, Initial Rail Equipment Accident/Incident Report. Because the reporting of the proper cause codes is very important to accident analysis, the basic philosophy is that the best available cause code(s) must be used to describe the cause(s) of an accident.

In your case, it would appear that there are two cause codes that should be recorded. First, it would appear that the primary cause should be entered as H306, “Shoving movement, absence of man on or at leading end of movement,” or, H307, “Shoving movement, man on or at leading end of movement, failure to control,” whichever is most applicable. Additionally, as a contributing cause, it would appear that cause code H702, “Switch improperly lined,” would be applicable to this accident. As you describe this accident, it would appear that an accident would not have occurred had the leading end of the movement been properly protected by the employee, and this would be the primary cause of the accident.

### 7.5 Common Reporting Errors

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*Duplication of Information.* A railroad whose involvement in an accident is limited to track maintenance responsibility should mark all items relating to the equipment consist “N/A.” These items are numbers 8, 9, 10, 11, 24, 25, 26, 27, 28, 29, 31, 33, 34, 35, 36, 40, 41, 42, 43, 44, 45, and 47. This information will be reported by the railroad responsible for the individual consist(s). A railroad that did not have track involved in the accident must not list the damage to the track.

Do not send in reports concerning a consist for which another railroad has reporting responsibility.

*Missing or Incomplete Reports.* Do not leave blank items on the form. If the value is unknown, an estimate should be used. If the item does not apply, “N/A” should be entered. If the correct response is “none,” a “0” should be inserted in the item.

An accident report must be made by all railroads involved, regardless of the extent of damage sustained by individual railroads.

When filing multiple reports for a single accident/incident, be sure to verify that the information contained on the various reports does not contradict itself. Of particular importance are such items as:

<u>Item</u>	<u>Contents</u>
5	Date of Accident/Incident
6	Time of Accident/Incident
7	Type of Accident/Incident
15	State Abbr. [where the accident occurred]
16	County [where the accident occurred]
38	Primary Cause Code

If a Form FRA F 6180.55a or Form FRA F 6180.57 is also required for the accident, be sure to compare similar items between these additional forms.

If there were reportable casualties resulting from the accident, a line entry must be made on Form FRA F 6180.55a for each casualty. In highway-rail grade crossing accidents, the railroad responsible for the equipment consist that struck or was struck by the highway user must file a Form FRA F 6180.57.

Avoid contradictions on a single form by comparing related items. For example, it would be incorrect for a report to show more locomotives or cars derailed in a consist than were actually contained in that consist, as shown in items 34 and 35. Similarly, if the report showed no conductors in item 42, it would be inconsistent to show the conductor’s time on duty in item 45.

### **8. Form FRA F 6180.81 - Employee Human Factor Attachment**

#### **8.1 Requirement**

If, in reporting a rail equipment accident/incident on Form FRA F 6180.54, a railroad cites an employee human factor as the primary cause or a contributing cause of the accident; then the railroad that cited such employee human factor must complete the Form FRA F 6180.81, which is titled “Employee Human Factor Attachment.” The Employee Human Factor Attachment is to be attached to the Rail Equipment Accident/Incident Report to which it pertains. For purposes of completing this form, “employee” is defined as a Worker on Duty—Railroad Employee (Class A), Railroad Employee not on Duty (Class B), Worker on Duty—Contractor (Class F), and Worker on Duty—Volunteer (Class H). See §§ 225.5, 225.12.

This form is only used in connection with a reportable rail equipment accident/incident where the Form FRA F 6180.54 submitted to FRA identifies an employee human factor as either the primary or contributing cause of the accident.

#### **8.2 General Instructions and Interpretations**

Each employee identified on Form FRA F 6180.81 must be notified according to the instructions found in the section for preparing Form FRA F 6180.78 and on the back of that form.

If a reporting railroad makes allegations concerning the employee of another railroad, the employing railroad must promptly provide the name, job title, address, and medical status of any employee reasonably identified by the alleging railroad, if requested.

If a railroad is initially unable to identify a particular railroad employee responsible for causing the accident, but subsequently makes such identification, the railroad shall prepare a revised Form FRA F 6180.81 and forward it to FRA. In addition, a notification (Form FRA F 6180.78) must be sent to the identified employee within 15 days of the date the revised Employee Human Factor Attachment was prepared.

A railroad has reasonable discretion to defer notification of implicated employees on medical grounds.

If an implicated employee has died as a result of the accident, a Notice addressed to that employee must not be sent to any person. If an implicated employee has died of any cause by the time that the Notice is ready to be sent, no Notice addressed to that employee is required.

If the reporting railroad has scheduled, or is conducting, a formal investigation of a rail equipment accident/incident to determine whether it was caused by an employee human factor and if the investigation has not concluded prior to the filing of the regular monthly report, the railroad must nonetheless attach a Form FRA F 6180.81 to the Form FRA F 6180.54 to which it

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pertains. The following instructions apply in these situations:

1. In the “Description” area of Form FRA F 6180.81, you are to explain that employee(s) have not been named because the railroad is awaiting results of the formal investigation. Indicate whether the formal investigation is currently in progress or the date that it is scheduled to begin.
2. After transmittal of such Form FRA F 6180.81, and when the formal investigation has been concluded for that rail equipment accident, the reporting railroad must promptly provide a “corrected copy” of FRA Form F 6180.81 for each implicated employee. Implicated employees are to be notified in accordance with instructions found in Section 8.2 of this Chapter.

The above provisions apply only when a formal investigation is scheduled or in progress and where the naming of an employee(s) on FRA forms prior to a railroad’s formal inquiry may give the appearance of “pre-judging” the guilt or innocence of the affected employee(s). If a railroad does not schedule a formal inquiry for a rail equipment accident/incident caused by an employee human factor, the standard provisions described in this Chapter apply.

### **8.3 Submission**

Form FRA F 6180.81 is to be attached to Form FRA F 6180.54 (when applicable). Form FRA F 6180.81 may be submitted via optical media (CD-ROM) or electronically via the Internet, but must also be submitted in .pdf or .jpg file format.



### **9. Form FRA F 6180.78 - Notice to Railroad Employee Involved in Rail Equipment Accident/Incident Attributed to Employee Human Factor: Employee Statement Supplementing Railroad Accident Report**

#### **9.1 Requirement**

For each employee whose act, omission, or physical condition was alleged by the railroad as the employee human factor that was the primary cause or a contributing cause of a reportable rail equipment accident/incident (as reported on Form FRA F 6180.54) and whose name was listed in the Employee Human Factor Attachment (Form FRA F 6180.81) for the accident, and for each such railroad employee of whose identity the railroad has actual knowledge, the alleging railroad shall:

1. Complete part I, “Notice to Railroad Employee,” of Form FRA F 6180.78 with information regarding the accident, in accordance with the following instructions and those on the form; and
2. Hand deliver or send by first-class mail (postage prepaid) the following to that employee, within 45 days after the end of the month in which the rail equipment accident/incident occurred:
  - a. A copy of Form FRA F 6180.78, “Notice to Railroad Employee Involved in Rail Equipment Accident/Incident Attributed to Employee Human Factor: Employee Statement Supplementing Railroad Accident Report,” with part I completed as to the applicable employee and accident.
  - b. A copy of the railroad’s Rail Equipment Accident/Incident Report and Employee Human Factor Attachment on the rail equipment accident/incident involved; and
  - c. If the accident was also reportable as a highway-rail grade crossing accident/incident, a copy of the railroad’s Highway-Rail Grade Crossing Accident/Incident Report on that accident. See § 225.12.

An “employee human factor” includes any of the accident causes signified by the train accident cause codes listed under “Train Operation—Human Factors” in the current FRA Guide, except for those train accident cause codes pertaining to non-railroad workers. For purposes of Form FRA F 6180.78 and for purposes of the definition of “employee human factor,” “employee” includes the following classifications:

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1. Worker on Duty—Railroad Employee,
2. Railroad Employee Not on Duty,
3. Worker on Duty—Contractor, and
4. Worker on Duty—Volunteer.

See § 225.5 for definition of “employee human factor” and § 225.12 for definition of “employee” and for substantive requirements.

This form is only used in connection with a reportable rail equipment accident/incident where the Form FRA F 6180.54 submitted to the FRA identifies an employee human factor as either the primary or contributing cause of the accident.

### ***9.1.1 Employee Action upon Receipt of Notification***

Employee Statements Supplementing Railroad Accident Reports are voluntary, not mandatory. The non-submission of a Supplement does not imply that the employee admits or endorses the railroad’s conclusions as to cause or any other allegations. See § 225.12(g)(1).

Although a Supplement is completely optional and not required, if an employee wishes to submit a Supplement and assure that, after receipt, it will be properly placed by FRA in a file with the railroad’s Rail Equipment Accident/Incident Report and that it will be required to be reviewed by the railroad that issued the Notice, the Supplement must be made on part II of Form FRA F 6180.78 (titled “Notice to Railroad Employee Involved in Rail Equipment Accident/Incident Attributed to Employee Human Factor; Employee Statement Supplementing Railroad Accident Report”), following the instructions printed on the form. These instructions require that, within 35 days of the date that the Notice was hand delivered or sent by first-class mail to the employee (except for good cause shown), the original of the Supplement be filed with FRA and a copy be hand delivered or sent by first-class mail to the railroad that issued the Notice. The railroad will have to reassess its conclusions as to the cause of the accident and other circumstances and file corrected reports with FRA concerning the accident, when appropriate. See § 225.12(g)(2).

Information that the employee wishes to withhold from the railroad must not be included in this Supplement. If an employee wishes to provide confidential information to FRA, the employee should not use the Supplement form (part II of Form FRA F 6180.78), but rather provide such confidential information by other means, such as a letter to the employee’s collective bargaining representative, or to the Federal Railroad Administration, Office of Safety Assurance and Compliance, RRS-11, 1120 Vermont Avenue NW, Washington, DC 20005. The letter should include the name of the railroad making the allegations, the date and place of the accident, and the rail equipment accident/incident number. See § 225.12(g)(3).

If an employee chooses to submit a Supplement to FRA, all of the employee’s assertions in the Supplement must be true and correct to the best of the employee’s knowledge and belief. See § 225.12(h).

### 10. Form FRA F 6180.57 - Highway-Rail Grade Crossing Accident/Incident Report

#### 10.1 Requirement

Any impact, regardless of severity, between railroad on-track equipment and any user of a public or private or pedestrian highway-rail grade crossing site, is to be reported on Form FRA F 6180.57. The crossing site includes sidewalks and pathways at, or associated with, the crossing. See § 225.19(b)

#### 10.2 Additional Requirements

*Rail Equipment Accident/Incident Report, Form FRA F 6180.54.* If a highway-rail grade crossing accident/incident results in reportable damage greater than the current reporting threshold used for Rail Equipment Accident/Incident reporting, the railroad must also submit to FRA a Form FRA F 6180.54, "Rail Equipment Accident/Incident Report." The reporting threshold for calendar years 2002-2005 was \$6,700. The reporting threshold for calendar year 2006 was \$7,700. The reporting threshold for calendar year 2007 is \$8,200. In these situations, the type of accident is to be coded as "Hwy-rail crossing" in block 7 of Form FRA F 6180.54. See § 225.19(c). Refer to <http://safetydata.fra.dot.gov/OfficeofSafety> and click on "Changes in Railroad Accident/Incident Recordkeeping and Reporting Info" for updated information.

*Railroad Injury and Illness (Continuation Sheet), Form FRA F 6180.55a.* If a highway-rail grade crossing accident/incident results in a reportable casualty, the railroad must also file a Form FRA F 6180.55a. See § 225.19 (d). A highway user who is involved in a highway-rail grade crossing accident/incident and is transported from the scene of a highway-rail grade crossing accident/incident to a medical facility via ambulance or other form of medical conveyance is presumed to have sustained an FRA reportable injury. Absent evidence to rebut this presumption, the railroad must report the injury to FRA on Form FRA F 6180.55a, "Railroad Injury and Illness Summary (Continuation Sheet)" and show the injury on block 46 on Form FRA F6180.57. If the railroad later discovers that the highway user did not sustain a reportable injury, the railroad must notify FRA in accordance with the late reporting instructions.

*Suicide.* If the impact between the railroad on-track equipment and a highway user occurred because the highway user committed or attempted to commit suicide (as determined by a coroner or other public official) the highway-rail grade crossing accident/incident must be reported on Form FRA F 6180.57 and the death of or injury to that highway user must be reported to FRA on FRA Form F 6180.55a. See instructions for completing blocks 41, 46, 49, and 52 under Section 10.4 below.

*Determination of Nature and Severity of a Highway-Rail Crossing Injuries:* In order to fulfill its responsibilities in determining the nature and severity of a highway-rail grade crossing injury and to accurately report such injury, a railroad must try to contact the injured individual or their representative by telephone and, if unsuccessful in obtaining the needed information, in writing. The railroad must keep a record of its efforts to make such contact. This record and

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documentation of any information obtained must be available for review and copying by an FRA representative under the same criteria as set forth in § 225.35 (b).

### 10.3 General Instructions and Interpretations

Any impact (including an impact due to the commission or attempted commission of a suicide, as determined by a coroner or other public authority), regardless of severity, between a railroad on-track equipment consist and any user of a public or private or pedestrian highway-rail grade crossing site, is to be reported on Form FRA F 6180.57. Highway users include, but are not limited to: automobiles, buses, trucks, motorcycles, bicycles, recreational vehicles, farm vehicles, construction vehicles, roadway maintenance vehicles, and pedestrians.

*Location of Actual Impact.* Incidents involving highway users who have unsuccessfully attempted to avoid striking or being struck by railroad on track equipment at a crossing site are to be reported, regardless of where the actual impact between the consist and the highway user occurred.

*U.S. DOT Grade Crossing Identification Numbers.* A Form FRA F 6180.57 must be completed for collisions/impacts between on-track equipment and users of highway-rail grade crossing sites, including designated crossing sites within industries or railroad yards. The grade crossing must be identified on Form FRA F 6180.57 by its U.S. DOT Grade Crossing Identification Number.

The U.S. DOT Grade Crossing Identification Number recorded in block 4 of Form FRA F 6180.57 is a key element of this report and must be provided. If you are unable to obtain this number from your railroad track or signal departments, or through the State Inventory Contact, then assistance may be obtained by contacting an FRA highway grade crossing manager at any of the regional offices found in Appendix G, or by calling (202) 493-6299 (refer to <http://safetydata.fra.dot.gov/OfficeofSafety> and click on “Changes in Railroad Accident/Incident Recordkeeping and Reporting Info” for updated information). The same procedures are to be followed when an accident occurs at a crossing that is not a part of the U.S. DOT Crossing Inventory.

In the event of a highway-rail crossing accident at a new crossing without a U.S. DOT Grade Crossing Identification Number, a new number must be obtained from FRA by calling (202) 493-6299 (refer to <http://safetydata.fra.dot.gov/OfficeofSafety> and click on “Changes in Railroad Accident/Incident Recordkeeping and Reporting Info” for updated information).

*Involvement of Other Highway Users in the Accident/Incident.* It is not necessary to complete additional FRA Form F 6180.57 reports for other highway users that become subsequently involved in an accident when they are on the same crossing approach. Report the first highway user involved in the accident. Briefly describe the accident and note any additional casualties or other vehicle damage in the narrative. A new Form FRA F 6180.57 report is required only if another highway user approaches the crossing from the opposite side and strikes or is struck by on-track equipment.

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### *Responsibilities of the Railroad Whose Involvement is Limited to Track Maintenance.*

**FRA Form F 6180.57.** A railroad whose involvement in a highway-rail grade crossing accident/incident is limited to track maintenance responsibilities is not to complete Form FRA F 6180.57. When the reporting railroad is different than the railroad maintaining the track, the railroad responsible for the track must be identified in item 3a. Report number “XXX” is to be entered in item 3b in these instances.

**FRA Form F 6180.54.** If the accident/incident satisfies the reporting requirements for rail equipment accidents (e.g., reportable railroad damage exceeds threshold), Form FRA F 6180.54 must also be completed by all railroads involved, including the railroad with track maintenance responsibility. See § 225.23(c).

**Unique Identifier.** Each accident/incident must have an identifying number that is unique for the report month. All forms used by a carrier to report a single event must use the same accident/incident number. Do not append additional characters on different forms for the same accident/incident. For example, if a railroad has two casualties resulting from an accident, do not report one casualty using the reporting number 12345, and the number 12345-A for the second. The reporting number must be exactly the same for both reports.

If actual data is not available when the report is due, estimated values are to be used. If it is later determined that an estimated value was significantly in error, a corrected report must be forwarded. See § 225.13.

All items must be filled in; do not leave items blank. Enter “N/A” for those items that do not apply to an accident. If “none” is the proper response for an item, for example, the number of cars in a consist, enter “0,” do not enter “N/A.”

**Closed Crossing.** If a highway-rail grade crossing is closed (see Chapter 2, Definitions, for the definition of a closed crossing), then the impact would not be classified as a highway-rail grade crossing accident, and the Form FRA F 6180.57 must not be submitted or completed. However, if the monetary threshold was exceeded, the Rail-Equipment Accident/Incident Report Form FRA F 6180.54 would be required. The “Type of Accident” is classified as an “Obstruction” if a vehicle travels on a road where the pavement has been removed (the road is closed) and attempts to cross the tracks and is struck by on-track equipment.

**Barricaded Crossing or Temporarily Closed Crossing.** Any impact at a barricaded or temporarily closed crossing is still reportable per Form FRA F 6180.57 requirements.

### **10.4 Instructions for Completing Form FRA F 6180.57**

<u>Item</u>	<u>Instruction</u>
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1.	<u>Name of Reporting Railroad</u> Enter the full name of the reporting railroad.
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1a.	<u>Alphabetic Code</u>
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Enter the reporting railroad's code, found in Appendix A. (Railroads whose involvement in the accident/incident is limited to track maintenance responsibility are not to complete a Form FRA F 6180.57.)

- 1b. Railroad Accident/Incident [Number]  
Enter a unique identifying number for the accident/incident being reported. All reports connected with this accident/incident must use the same reporting number. The report number may contain up to 10 numeric or alphabetic characters.
2. Name of Other Railroad or Other Entity Filing for Equipment Involved in Train Accident/Incident  
If an equipment consist operated by another railroad or other entity was involved in the accident, enter the full name of that railroad. If more than one other railroad had a consist involved, list only one name.
  - 2a. Alphabetic Code  
Enter the code of the railroad identified in item 2.
  - 2b. Railroad Accident/Incident No.  
Enter the reporting number used by the railroad shown in item 2 to identify this accident/incident.
3. Name of Railroad or Other Entity Responsible for Track Maintenance  
Enter the name of the railroad or other entity responsible for maintaining the track on which the accident/incident occurred.
  - 3a. Alphabetic Code  
Enter the code of the railroad identified in item 3.
  - 3b. Railroad Accident/Incident No.  
Enter the reporting number used by the railroad shown in item 3 to identify this accident/incident. If the railroad shown in item 3 differs from the reporting railroad, and if the accident does not require that a Form FRA F 6180.54 be filed, then enter "XXX" as the accident/incident number. However, if the accident also requires that Form FRA F 6180.54 be completed, enter the number used on the rail equipment form by the railroad responsible for track maintenance.
4. U.S. DOT Grade Crossing Identification Number  
Enter the U.S. DOT National Highway-Rail Crossing Inventory Identification Number assigned to the crossing involved. This field must contain this number before submitting the incident report. This number must be provided by the reporting railroad, regardless of who actually owns or maintains the track or the crossing site. This is also required for a crossing that is on private property within industries and railroad yards, such as in a plant area owned by a private corporation or a railroad. Contact the operating railroad to obtain the number. (It is strongly recommended that the Accident/Incident Report be compared with the

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U.S. DOT Inventory Report on FRA's Web site to ensure that the correct crossing number has been identified and that the other data elements match.) Entering the term "NOT ASSIGNED" is not acceptable and the Form will be returned for completion with the correct information.

In the event that the subject crossing was never assigned a number, a new valid crossing number must be obtained from FRA. If an identification number has not been assigned to the crossing, a completed Inventory Report Form must be filed with the incident report. The new U.S. DOT Crossing Inventory Form can be obtained from FRA's Office of Safety Web site (<http://safetydata.fra.dot.gov/OfficeofSafety>) or by calling (202) 493-6299. (For updated information refer to <http://safetydata.fra.dot.gov/OfficeofSafety> and click on the "Crossing" tab to query inventory. Existing crossing numbers can be obtained by contacting the FRA Washington Headquarters or searching FRA's Web site.

There is only one exception for which an incident report will be accepted without an assigned number in this field. This is where the crossing was created to serve specific temporary activities for less than 6 months (such as for construction). In this case, enter "TEMP."

5. Date of Accident/Incident  
Enter the date the accident/incident occurred.
6. Time of Accident/Incident  
Enter the time the accident/incident occurred and check the appropriate "a.m." or "p.m." box. Do not use military time.
7. Nearest Railroad Station  
Enter the name of the nearest time table station. In event of accidents involving Amtrak, the host railroad's nearest station will apply.
8. Subdivision  
Enter the full name of the subdivision on which the accident occurred, i.e. the track owner's subdivision name. If the railroad is not so divided, enter the word "System." In the event of a joint accident involving Amtrak, the host railroad's subdivision will apply.  
  
Note: If the accident occurred in a major terminal and subdivision is not applicable, enter "terminal/yard name"
9. County  
Enter the full name of the county or parish in which the accident/incident occurred.
10. State Abbr. Code

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Enter the appropriate State code, found in Appendix B, for the State in which the accident occurred.

11. City  
If the accident occurred within the jurisdiction of a city, town or hamlet, enter the full name of this location; otherwise, enter “N/A.”
12. Highway Name or Number  
Enter the name or number of the highway or street involved. If the impact occurred at a public crossing, place an “X” or checkmark in the block titled “Public.” If at a private crossing, place an “X” or checkmark in the block titled “Private.”
13. Type [of Highway User Involved]  
Select the code that best identifies the type of highway user involved in the accident/incident.

Note: If a pedestrian is identified in this item, then items 14, 42, 44, 45, and 47 are to be coded “N/A”

14. Vehicle Speed [of Highway User Involved]  
List the estimated speed (mph) that the highway user was traveling at the time of impact. If the highway user was not a vehicle, enter “N/A”. If the vehicle was stopped on the crossing at the time of impact, enter “0.”
15. Direction [of Highway User Involved]  
Select the code that best describes the geographical direction in which the highway user was moving, and enter it in the box provided. If the highway user was stopped, identify the intended direction of travel.

Note: It is possible in some circumstances for the geographical direction of the highway user to be the same as the time table direction of the railroad consist given in item 31.

16. Position [of the Highway User Involved]  
Select the code that best describes the position of the highway user at the time of impact, and enter in the code box.

FRA proposes to amend block 16, “Position” to read (1) Stalled or stuck on crossing (currently “Stalled on Crossing”); (2) Stopped on Crossing; (3) Moving over crossing; (4) Trapped on crossing by traffic (currently “Trapped”); (5) Blocked on crossing by gates. In doing so, FRA is clarifying the difference between choices (1) and (4). FRA has found that under the current options railroads do not necessarily understand that current option (4) “Trapped” means trapped by traffic. FRA is also addition a fifth option, (5) “Blocked on crossing by



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gates” to indicate those situations wherein a highway-user is prevented from leaving the crossing because the highway user is blocked in by crossing gates.

Note: If the highway vehicle was stopped or stalled on the crossing at the time of impact, the speed given in item 14 must be “0.”

17. Equipment [Rail Equipment Involved]

Select the code that best identifies the railroad equipment consist involved in the accident/incident and enter it in the box provided. (See definitions of types of rail equipment given in Chapter 2.) Note that on-track work equipment such as ballast tampers are classified as cars and, therefore, should be identified by using code “4” or “5.”

When completing this item, pay particular attention to its relationship to other items on the form to avoid contradictions. Some examples of contradictory responses are as follows:

- a. If the description of a railroad equipment includes a reference to “pulling,” “pushing,” or “moving,” then train speed (“Consist Speed”) in item 30 cannot be “0.”
- b. If the description states that the consist was “standing,” then speed in item 30 must be “0,” and item 19 cannot indicate that the consist struck the highway user.
- c. If a train is identified, there must be a count of the number of locomotives given in item 28. If the equipment consist was a single car or cut of cars, then item 28 must be “0,” and the count of cars must be entered in item 29.

When this report is completed with an FRA Form F 6180.54, the “Type of Equipment” must be the same in both reports. The values of the proposed codes are:

1. Freight train
2. Passenger train - Pulling
3. Commuter train - Pulling
4. Work train
5. Single car
6. Cut of cars
7. Yard/switching
8. Light loco(s)

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- 9. Maint./Inspect. car
  - A. Spec. MoW Equip
  - B. Passenger train - Pushing
  - C. Commuter train - Pushing
  - D. EMU
  - E. DMU

18. Position of Car Unit in Train [Rail Equipment Involved]

Identify the position within the consist of the first locomotive unit or car that struck or was struck by the highway user. The position is determined by counting from (and including) the leading locomotive unit or car to the position of the first car or locomotive involved in the accident. The leading unit is the first car or locomotive to enter the crossing, regardless of the location of the locomotive(s). For example, in a pushing movement involving a cut of cars and a single locomotive, the count would begin from the car that first entered the crossing.

Special Instruction: When the consist contains articulated car(s), the count for these is to be the number of platforms/units in such a car. This is necessary in order to maintain comparability of train lengths. The narrative is to contain a reference that articulated cars were included in the consist.

Note: If a single railroad car or locomotive was involved, or if the railroad consist struck the highway user (as shown in item 19), then the entry in this item must be "1."

19. Circumstance [Rail Equipment Involved]

Specify whether the railroad consist struck the highway user or was struck by the highway user. If the railroad equipment struck the highway user, be sure that item 17 does not refer to "standing" equipment, and that the speed of the on-track equipment is given in item 30. If the highway user struck the railroad consist, be sure that the estimated speed of the highway vehicle given in item 14 is greater than "0" and that the position of the highway user was coded "3" in item 16.

20a. Was the highway user and/or rail equipment involved in the impact transporting hazardous materials?

Enter the code that identifies whether or not the rail equipment and/or the highway user was transporting hazardous material as cargo at the time of the impact. For the rail equipment, this includes any car containing hazardous material cargo within the consist, regardless of location, but not generally the locomotive because diesel fuel used by the locomotive and fuses carried by the locomotive are not considered to be cargo. Highway users are to be identified

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only when the hazardous material is being transported as cargo; the gasoline or diesel fuel used by the vehicle's engine is not considered to be cargo.

- 20b. Was there a hazardous materials (HAZMAT) release by  
Enter the code into the box that shows if there was a hazmat release by the highway user and/or rail equipment. If there was no hazmat release by either of these, enter the code for "neither." A release of gasoline or diesel fuel used by the vehicle's engine is not considered a hazmat release for the purposes of this item. (Describe such occurrences in the narrative.)
- 20c. State here the name and quantity of the hazardous material released, if any  
Enter the name of the hazardous material released, followed by the quantity released. State the measure, for example, 50 gal[lons], 20 tons. Describe the hazardous material released in the narrative by name or the Standard Transportation Commodity Code (STCC). (Note: Any release of hazardous material must also be reported on DOT form F 5800.1. See 49 CFR § 171.15 and § 171.16 for requirements.)
21. Temperature  
Enter the temperature (Fahrenheit) at the accident site at the time of the accident. If the temperature was below zero, preface the temperature number with a minus (-) sign.
22. Visibility  
Select the most appropriate entry, and place it in the code box. Make sure that the entry does not contradict the time given in item 6; for example, if the time of the accident was 1:30 p.m., it would be inappropriate to code the visibility as "Dawn."
23. Weather  
Select the most appropriate weather condition at the time and location of the accident, and enter the code in the box provided.
24. Type of Equipment Consist  
Select the code that best identifies the consist for which this report is being prepared, and enter it in the box provided. Make sure that this entry is consistent with the values given in items 17, 28, and 29.
25. Track Type Used by Rail Equipment Involved  
Select the code that identifies the type of track on which the accident occurred, and enter it in the box provided. Branch lines should be reported as main line, code "1."
26. Track Number or Name  
Enter the number or name used to identify the track on which the accident occurred. If it is main track of a single-track line, enter "single main track."

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27. FRA Track Class

Enter the class of track on which the reported consist was located at the time of the accident. Classes of track are defined in the Federal Track Safety Standards (49 CFR Part 213). See 49 CFR § 213.4 and § 213.9. Excepted track should be entered as Class X.

<u>Track Class</u>	<u>Maximum Speed</u>	
	<u>Freight Trains</u>	<u>Passenger Trains</u>
X	10	Prohibited
1	10	15
2	25	30
3	40	60
4	60	80
5	80	90
6	110	110
7	125	125
8	160	160
9	200	200

28. Number of Locomotive Units

Enter the total number of locomotive units in the consist involved in the accident; if none, enter “0.”

29. Number of Cars

Enter the total number of cars in the equipment consist involved in the accident; if none, enter “0.” Be sure to include any caboose(s) in the consist in this count.

See special instruction for item 18 on counting articulated cars.

30. Consist Speed

List the speed (mph) at which the consist was traveling when the impact occurred. Enter “E” in the code box to indicate if this is estimated; or enter “R” for a recorded speed. If the consist was not moving, enter “0.”

31. Time Table Direction

If the consist was either moving or temporarily stopped, enter the code that describes the time table or schedule direction in the box provided. If this equipment consist was a car or a cut of cars standing on the track, enter “N/A.”

32. Type of Crossing Warning

Identify the warning devices by entering the appropriate code(s) in the box(es). For codes “2” and “3,” “FLS” means “flashing light signal.” Enter a code of “5”

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(“Highway Traffic Signals”) whenever such a signal is present at the crossing site and is used for controlling highway traffic over the crossing.

33. Signaled Crossing Warning

Only if Codes 1-6 in item 32 (Type of Crossing Warning) are selected, enter in this item the status of the warning devices at the crossing at the time of impact, using the following:

1. Provided minimum 20-second warning.
2. Alleged warning time greater than 60 seconds.
3. Alleged warning time less than 20 seconds.
4. Alleged no warning.
5. Confirmed\* warning time greater than 60 seconds.
6. Confirmed\* warning time less than 20 seconds.
7. Confirmed\* no warning.

\* Confirmed means that there is a physical record (e.g., event records, video tape or other tangible documentation). Confirmed warning time of more than 60 seconds is classified as a false activation.

If status code 5, 6, or 7 was entered, you must append a code from the following:

- A. Insulated rail vehicle.
- B. Storm/lightning damage.
- C. Vandalism.
- D. No power/batteries dead.
- E. Devices down for repair.
- F. Devices out of service.
- G. Warning time greater than 60 seconds attributed to accident-involved train stopping short of the crossing, but within track circuit limits, while warning devices remain continuously active with no other in-motion train present.
- H. Warning time greater than 60 seconds attributed to track circuit failure (e.g., insulated rail joint or rail bonding failure, track or ballast fouled).
- J. Warning time greater than 60 seconds attributed to other train/equipment within track circuit limits.

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- K. Warning time less than 20 seconds attributed to signals timing out before train's arrival at the crossing/island circuit.
- L. Warning time less than 20 seconds attributed to train operating counter to track circuit design direction.
- M. Warning time less than 20 seconds attributed to train speed in excess of track circuit's design speed.
- N. Warning time less than 20 seconds attributed to signal system's failure to detect train approach.
- P. Warning time less than 20 seconds attributed to violation of special train operating instructions.
- R. No warning attributed to signal system's failure to detect the train.
- S. Other cause(s). Explain in Narrative Description.

Note: If the crossing site was not protected by train-activated warning devices, enter "N/A."

### 34. Roadway Conditions

Enter the code that best describes the condition of the roadway at the crossing at the time of the incident. This differs from weather conditions. For example, while the weather may be clear at the time of the incident, the roadway may have snow or ice that could impact the highway user.

#### Roadway Conditions - Proposed Codes

- A. Dry
- B. Wet
- C. Snow/slush
- D. Ice
- E. Sand, Mud, Dirt, Oil, Gravel
- F. Water (Standing, Moving)

### 35. Location of Warning

Select the code that identifies the location of the crossing warnings shown in item 32, and enter it in the code box. If there was no protection at the crossing, enter "N/A," and enter a code of "12" in item 32 for "None" (i.e., no warning).

### 36. Crossing Warning Interconnected with Highway Signals

If highway traffic signals within 500 feet of the crossing site are interconnected with the train detection circuitry, such that they restrict highway users from the crossing whenever a rail consist occupies or is about to occupy the crossing, enter "1." If the highway traffic signals on the approach to the crossing are within 500

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feet of the crossing but are not interconnected with the train detection circuitry, enter “2.” Enter “3” (unknown) in the code box only after consultation with the signal department responsible for track maintenance and a determination could not be made whether the highway traffic signals are interconnected. If highway signals are not present within 500 feet of the crossing, enter “N/A”.

Note: Item 32 identifies warning devices actually present at, or in the near vicinity of, the crossing. Therefore, it is possible to show highway traffic signals interconnected with train detection circuitry in this item, but not to enter a code of “5” in item 32.

37. Crossing Illuminated by Street Lights or Special Lights

If street lights or other special lights used to illuminate the crossing site were on at the time of the accident/incident, enter “1.” If there were no such lights or if they were not illuminated at the time of the accident, enter “2.” While code “3” (unknown) is authorized, it can only be used after the railroad has made a diligent effort to discern this fact, and a determination could not be made.

38. Highway User’s Age

Enter the age of the driver. This block is optional; however, the railroad is encouraged to be as diligent as possible when completing this block. If the highway user was a pedestrian, please provide age, if known.

39. Highway User’s Gender

Enter “1” if the driver was a male, or “2” if the driver was a female. This block is optional; however, the railroad is encouraged to be as diligent as possible when completing this block. If the highway user was a pedestrian, please identify gender.

40. Highway User Went Behind or in Front of Train and Struck or was Struck by Second Train

Enter the appropriate entry in the code box.

Note: If a Form FRA F 6180.57 must be submitted, then this field must be answered when there are two or more trains involved in the accident/incident, and also when there is only one train involved in the accident/incident.

41. Highway User Action

Enter the appropriate entry in the code box. If code “3” (“Did not stop”) is used, the vehicle must be shown as moving over the crossing in item 16, and traveling at a speed greater than “0” in item 14. In the event of a suicide, or attempted suicide, use code 8 regardless of whether other choices may be applicable.

1. Went around the gate

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2. Stopped and then proceeded
3. Did not stop
4. Stopped on crossing
5. Other (specify)
6. Went around/thru temporary barricade
7. Went through the gate
8. Suicide or attempted suicide

Note: If 6, Went around/thru temporary barricade, is selected due to the temporary closure of the crossing, explain in the narrative the circumstance of the closure, e.g. the roadway was closed for repair of crossing surface, maintenance/testing of automated warning devices, or for other purposes. Additionally, explain how the closure was accomplished e.g.: roadway closed to traffic with jersey barriers on both approaches, or roadway closed with construction barrels on easterly approach, etc.

42. Driver Passed Standing Highway Vehicle

Identify whether the highway user, immediately before the accident, had passed another vehicle that had stopped short of the crossing.

Note: If a pedestrian is identified in item 13, then enter “N/A.”

43. View of Track Obscured by

If the highway user’s view approaching the crossing was obstructed to the extent that he or she may have been unaware that a rail consist was about to occupy or was occupying the crossing, enter the code that identifies the primary obstruction. If the highway user had a clear view of an approaching consist which had not yet occupied the crossing, enter code “8.”

44. Driver was [Condition After Accident/Incident]

Select the code that describes the extent of harm to the driver. If the driver was fatally injured or injured to the extent of requiring medical treatment, a line entry on Form FRA F 6180.55a must also be completed for this accident/incident. See § 225.19(d). If the driver committed or attempted to commit suicide (as determined by a coroner or other public official) then the fatality or injury to that individual must be reported as a suicide data case, and item 44 should also be completed for this case.

45. Was Driver in the Vehicle?

If the driver of the highway vehicle was in the vehicle at the time of impact, enter “1” in the code box. If the driver had left the vehicle prior to the impact, enter “2.”



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46. [Casualties to] Highway-Rail Crossing Users

Enter the total number of reportable deaths and injuries (including suicides and attempted suicides). All deaths and injuries must also be reported individually on Form FRA F 6180.55a. A highway user who is involved in a highway-rail grade crossing accident/incident and is transported from the scene of a highway-rail grade crossing accident/incident to a medical facility via ambulance or other form of medical conveyance is presumed to have sustained an FRA reportable injury. See instructions on Railroad Injury and Illness (Continuation Sheet), Form FRA F 6180.55a at the beginning of this chapter.

Note: If the driver committed suicide, as determined by a coroner or other public authority, and the passenger was not a party to the suicide, then the driver should be shown as a suicide case, but the passenger injury would be reported as a regular case.)

Suicides and attempted suicides, as determined by a coroner or other public authority must be included in the casualty counts in boxes 46, 49, and 52, as applicable.

47. Highway Vehicle Property Damage

Enter the estimated cost of damages sustained by the highway vehicle involved. The amount given should reflect the cost of repairs. If the vehicle is beyond repair, the cost is the replacement value of the vehicle. If there was no damage to the vehicle, enter "0." Do not make entries such as "totaled."

48. Total Number of Vehicle Occupants (including driver)

Enter the total number of vehicle occupants involved in the incident (including driver, if applicable). Vehicle includes automobiles, buses, trucks, motorcycles, bicycles, farm vehicles, and all other modes of surface transportation, motorized and unmotorized. Currently, this item is "Total Number of Highway-Rail Crossing Users", but the proposed change would change this to "Vehicle Occupants." The vehicle occupants are those people in the vehicle at the time of impact.

49. [Casualties to] Railroad Employees

See instructions for block 46. For purposes of this form, "Railroad Employees" includes only those persons classified as Worker on Duty—Railroad Employee (Class A).

Suicides and attempted suicides, as determined by a coroner or other public authority, must be included in the casualty counts in boxes 46, 49, and 52, as applicable.

50. Total Number of People on the Train

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Enter the total number of people on the train at the time of the incident (including passengers and train crew).

51. Is a Rail Equipment Accident/Incident Report Being Filed?

If the accident resulted in reportable railroad damage above the threshold established for reporting rail equipment accidents/incidents, enter "1" in code box, and complete Form FRA F 6180.54.

52. [Casualties to] Passengers on Train

See instructions for block 46. Passengers on trains are those identified as Class C.

Suicides and attempted suicides, as determined by a coroner or other public authority, must be included in the casualty counts in boxes 46, 49, and 52, as applicable.

53a. Special Study Block - Recording of Accident/Incident

Indicate whether the highway-rail crossing accident/incident was recorded by a locomotive video recorder, by checking off either the "Yes", or "No" check box (for "Video Taken?"). If , "Video Taken?" is "Yes", indicate if the recording was used by the railroad (i.e., information gathered in viewing the recording was used) to complete the FRA Highway-Rail Grade Crossing Accident/Incident Report, by checking either the "Yes or "No" check box (for "Video used?").

Collecting this information will provide FRA with knowledge as to the availability of video footage for particular accident/incidents; give FRA an indication of how often and to what degree railroads are collecting and reviewing video footage of these accidents/incidents; and make available to FRA an additional tool to study the causes and circumstances of these accident/incidents. For additional information on requirements related to event recorders, see 49 CFR 229.135 "Event Recorders".

53b. Special Study Block

The "Special Study Blocks" (SSB) in this item are for collection of essential data as the need arises. The FRA will notify the railroads in writing, or if appropriate, through publication in the Federal Register, of the purpose and the type of information that is to be collected. In conjunction with the Federal Highway Administration (FHWA), FRA will publish in the Federal Register any announcement affecting highway users, thus allowing motor carriers the opportunity to provide FRA pertinent special study information.

54. Narrative Description

An accident is frequently the culmination of a sequence of related events, and a variety of conditions or circumstances may contribute to its occurrence. A complete record of all of these is beneficial in accident prevention analysis. However, it is not practical, even if it were possible, to develop forms and codes that would capture every detail that may be associated with the causes and

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resulting consequences of each accident. Therefore, the most appropriate combination of available codes that best identifies the likely primary and any contributing cause and other factors, is to be used when completing the railroad's report.

The limitations imposed by standardized reporting forms make it critical that the narrative portion of the report provide additional information concerning those items that cannot be adequately described on the coded portions of the form. The wide variation in the causes and circumstances of accidents makes it impractical to prepare a comprehensive list of items to include in any discussion. The railroad should include any information that increases our knowledge of the underlying reasons why the accident occurred and its consequences. Simply entering, for example, "train struck vehicle at crossing xxx" does not provide additional insight into the causal factors of the incident.

55. Typed Name and Title

Type or print the name and title of the person responsible for preparing this report form.

56. Signature

Signature of the person shown in item 55.

Note: If Form FRA F 6180.57 is to be submitted electronically, signature (item 56) and date of signature (item 57) are not required.

57. Date

Date the signature was made in item 56. This is the date the form was initially completed.

### 10.5 Questions and Answers

**Q1. A man driving a truck did not see a train occupying a highway-rail crossing and lost control of his vehicle when he slammed on the brakes to avoid a collision. His truck ended up in the ditch with considerable damage, and he broke his arm. What reports need to be prepared?**

A1. Since an impact did not occur between a highway and a rail user, you do not need to prepare a highway-rail accident/incident report (Form FRA F 6180.57). However, the motorist did sustain a reportable injury arising from the operation of a railroad. Therefore, an injury report (Form FRA F 6180.55a) must be completed. If the motorist had struck the consist at the crossing using this example, a Form FRA F 6180.57 would be required even though the impact did not occur on the crossing site. If an injury report (Form FRA F 6180.55a) is completed for this case, the Event Circumstance Code should not be "32" Highway-rail collision/impact.

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- Q2. Say that a highway user struck a signal stand at a highway crossing and was injured, but there was no on-track equipment present, nor were employees of the railroad in the vicinity. Is this reportable?**
- A2. No. Section 225.15(a) exempts the reporting of motor vehicle accidents at highway-rail crossing sites when they do not involve the presence of on-track equipment or railroad employees.
- Q3. A motorist in an off-road vehicle was waiting behind several automobiles at a crossing site where the gates were down and a standing train was occupying the track. He apparently became impatient and drove his vehicle off the highway and parallel to the track to a point where he could cross over the track behind the train. His vehicle stalled on a parallel set of tracks, and he was unable to start it. He exited his truck just before a train on the adjacent track hit it. Should this be reported as a highway-rail accident/incident or any other type?**
- A3. An event such as this would not qualify as a highway-rail crossing collision since the motor vehicle operator had left the highway of his own choosing and his vehicle was struck at a location other than a designated crossing site. The event would be reportable as an obstruction accident on Form FRA F 6180.54 if reportable damage was in excess of the threshold. If the motorist had been hurt in connection with this event, then an injury report (Form FRA F 6180.55a) would need to be completed.
- Q4. There was a collision between a train and an automobile at a highway-rail grade crossing. The driver was injured and taken by ambulance to a local hospital. Neither the hospital nor the driver would reveal the injuries to the railroad. Without knowing the injuries, the railroad cannot determine if the injury met the FRA's reportability criteria. Is this injury reportable to FRA?**
- A4. FRA realizes that this type of case is difficult to report under these circumstances. However, when an injury occurs at a highway-rail grade crossing, due to a collision with a highway user and on track equipment, and the injured highway-user is taken from the accident scene by an ambulance then the injury is reportable unless there is documentation to prove that the injury did not meet the FRA's reportability criteria. The injury must be shown on the Highway-Rail Grade-Crossing Accident/Incident Report Form FRA F 6180.57 and an injury report must be reported on the Railroad Injury and Illness Summary (Continuation Sheet) Form FRA F 6180.55a. If no injury information is available then the code "999" should be placed in block 5i – Injury-Illness Code.

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### 10.6 Common Reporting Errors

The most common reporting error is when crossing data reported on the Form FRA F 6180.57 does not match the information on file in the U.S. DOT National Crossing Inventory File. The reporting railroad should always check FRA's Web site at <http://safetydata.fra.dot.gov/OfficeofSafety>, and click on "Crossing" tab to query Inventory file to ensure that the information matches and is consistent. If the location, type of crossing, warning devices, etc., are different, the railroad reporting officer should check to see if the accident was reported at the correct crossing. If it was and the current Inventory information is outdated or incorrect, then an updated Crossing Inventory Report (Form FRA F 6180.71) should be filed with the Highway-Rail Crossing Accident Report.

#### *Contradictory Information.*

The following is a partial listing of some of common errors resulting from contradictory information.

If a highway vehicle was moving at the time of the impact, vehicle speed in item 14 cannot be "0," and the vehicle's position on the crossing shown in item 16 must be "3" ("Moving over crossing").

If the highway vehicle was not moving, the vehicle speed must be "0"; the position code in item 16 cannot be "3" ("Moving over crossing"), and item 19 must be "1," indicating that the rail consist struck the highway user.

If the rail consist was moving at the time of the impact, item 17 must be either "1," "2," "4," "6," or "8," (or "A," "B," "D," or "E") and the speed in item 30 cannot be "0." If the rail consist was not moving, then item 17 must contain "3," "5," "7," or "8" (or "C," "D," or "E"); the consist speed in item 30 must be "0"; and item 19 must be coded "2," indicating that the highway user struck the rail consist.

If the rail consist struck the highway user, code "1" must be entered in item 19, and the position of the car/unit in the consist given in item 18 must be "1." This position is determined by counting from the leading car/unit in the consist, identified as the first car/unit to enter the crossing. Therefore, whenever a rail consist strikes the highway user, it will always be the leading unit that makes the initial contact.

Item 41 cannot indicate that a highway user went around or through gates if gates were not present at the crossing, as shown in item 32.

#### *Failure to File Other Accident/Incident Forms or Filing Contradictory Data On Different Reports.*

When Part 225 requires that a single accident be reported on more than one kind of form, be sure to verify that similar information contained on the various reports is consistent. The following are a few of the items that should be reviewed prior to forwarding the monthly reports.

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If reportable casualties occurred in the accident, these must be reported individually on Form FRA F 6180.55a.

If reportable damage (rail equipment and track) exceeded the threshold for train accidents, Form FRA F 6180.54 must be completed. Carefully compare all related information between these forms to ensure consistency.

The casualties reported on Form FRA F 6180.55a must have the same State code as that shown on Form FRA F 6180.57.

### 11. Form FRA F 6180.56 - Annual Railroad Report of Employee Hours and Casualties, by State

#### 11.1 Requirement

A summary of all hours worked by railroad employees, and employee casualties, during the report year must be made on Form FRA F 6180.56 and be included with the December submission.

#### 11.2 General Instructions and Interpretations

To alleviate the recordkeeping problems caused when certain employees, such as train crews, work in more than one State, the hours worked may be computed based on the location of such persons' home terminals or the locations where they normally reside. This includes instances when railroad employees operate trains into Canada or Mexico.

The sum of the hours worked shown on this form must equal the total number of hours reported on the monthly reports (Form FRA F 6180.55). If not, then updates to the monthly reports must be made. The hours worked by all employees of the railroad, regardless of occupation, are to be included. Non-work time, such as sick leave, is to be omitted even though it is paid. Do not include hours of volunteers, the employees of railroad contractors, or other classifications of persons.

The total casualties reported for the year on this form must not differ from the total casualties for the year as reported on Form FRA F 6180.55a for Worker on Duty—Railroad Employees (Class A). Do not include casualties of volunteers, the employees of railroad contractors, or other classifications of persons.

#### 11.3 Instructions for Completing Form FRA F 6180.56

<u>Item</u>	<u>Instruction</u>
-------------	--------------------

- |    |  |
|----|--|
| 1. | <u>Reporting Railroad</u><br>Enter the full name of the reporting railroad in the box provided.                    |
| 2. | <u>Alphabetic Code</u><br>Enter the alphabetic code of the reporting railroad in the box provided. See Appendix A. |
| 3. | <u>Report Year</u><br>Enter the calendar year covered by this report.  |
| 4. | <u>Establishments Included in this Report</u><br>List the number of establishments operated during the year.       |

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5. Average Employment in Report Year  
Enter the average number of workers employed during the report year. Count all railroad employees. Include railroad employees who are seasonal, temporary, part-time, office and clerical staff, maintenance, etc. This number may be calculated by adding the employment count from all payroll periods during the year and then dividing that figure by the number of payroll periods.
  
6. State/Employee Hours/Casualties  
Enter the number of hours worked for the report year in each State by employees of the reporting railroad. Also enter the total count of casualties for Worker on Duty—Railroad Employees (Class A), both fatal and nonfatal, for the reporting railroad, for the year, by State.  
  
Do not include time paid, but not actually worked, such as holidays and vacations.
  
7. Total Employee Hours for the Year  
  
Enter the total number of combined hours worked for the report year, for all of the States, by employees of the reporting railroad. Include hours of any employee whose job required temporary absence from the United States.
  
8. Total Casualties During the Year  
Enter the total number of casualties to persons classified as Worker on Duty—Railroad Employee (Class A). Please attach a brief explanation for those States where employee casualties occurred but no hours are reported. All casualties, including covered data cases reported as codes A, R, or P are to be included; however, covered data cases reported as X (for suicides or attempted suicides, as determined by a coroner or other public authority) are not to be included in the Total Casualties During the Year.
  
9. Typed Name and Title  
Enter the name and title of the person responsible for preparing this report.
  
10. Signature  
Signature of the person shown in item 9.
  
11. Date  
Date that the signature in item 10 was made. This is the date the record was initially completed.



## 12. Supplemental Information: Contractors; Commuter and Other Passenger Rail Operations

### 12.1 General

49 CFR part 225 accident/incident reporting regulations apply to all railroads (including commuter and other passenger rail operations) unless specifically excepted under § 225.3.

FRA has a specific need to know of accidents, injuries, accident rates and injury rates of passenger and commuter operations. This has created a special record keeping environment to allow FRA to determine the safety record of each commuter railroad.

### 12.2 Contractors

#### *12.2.1 Contractors – non-railroad employees*

Often a railroad will hire a contractor to perform certain tasks for the railroad. FRA identifies two types of Contractor: Worker On Duty—Contractor, and Contractor—Other. Both of these categories are for persons who are not employed by any railroad and are not covered by the Railroad Retirement System. If a contractor is injured performing safety-sensitive functions, then the contractor injury is to be reported to FRA on Form FRA F 6180.55a as Worker On Duty—Contractor (Class F). If a contractor is injured performing non-safety sensitive functions, then the contractor injury is to be reported to FRA on Form FRA F 6180.55a as Contractor-Other.

For example, an employee of a contractor is performing safety-sensitive functions for a passenger railroad. The employee sustains an FRA reportable injury. The passenger railroad must report this injury (under the passenger railroad's unique code/identifier) to FRA on Form FRA F 6180.55a as an injury to a Worker on Duty - Contractor.

However the hours worked by contracted employees are not reported on Form FRA 6180.55, in block 15, "Railroad Worker Hours". Reportable injuries to contractor employees are reported to FRA by the contracting railroad and to OSHA by the employing contractor.

#### *12.2.2 Contractors – railroad employees*

FRA identifies two types of Railroad employees: Worker on Duty (Class A) and Employee not on Duty (Class B). Both of these categories are for persons who are employed by a railroad and are covered by the Railroad Retirement System. Contracted employees who are employees of a contracted railroad and are covered by the Railroad Retirement System are considered railroad employees OF THE CONTRACTING RAILROAD for purposes of FRA accident/incident reporting.

For example, an employee of a contracted railroad who is performing service for a passenger railroad is considered a Worker on Duty (Class A) of the passenger railroad for the purpose of accident/incident reporting, even though the worker is actually employed by the contracted

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railroad. Accordingly, the passenger railroad must report to FRA, under the passenger railroad's code/identifier, the hours the contracted railroad employee worked in block 15, "Railroad Worker Hours," of the passenger railroad's Form FRA F 6180.55 report to FRA as Worker on Duty – Employee (Class A). Accordingly, the hours worked by, and any injury to, the contracted railroad employee are not to be reported to the FRA by the employing railroad under Part 225. Note that when determining whether a railroad qualifies for partial relief from the recordkeeping requirements under § 225.3(c)(1), a railroad should not include contract employees (railroad or non-railroad) when determining if the railroad has 15 or fewer employees covered by the hours of service law.

### **12.3 Train Operations**

#### ***12.3.1 Performed by Railroad***

Many passenger railroads perform their own train operations; these railroads should report their accidents and incidents using the normal procedures in this Guide.

"Passenger railroad" includes commuter, excursion, tourist, or any other form of railroad transporting passengers.

#### ***12.3.2 Performed by Contractor***

When a railroad's operations are performed by a contractor (e.g., another railroad or transportation company) the contracting railroad still must report to FRA all accidents and incidents discernably caused by an event or exposure arising from the operation of the contracting railroad, on the appropriate FRA forms, as well as report to FRA train-miles, railroad worker hours, passenger train-miles, and other applicable information on the FRA Form F 6180.55, even though railroad operations conducted in part or wholly by contracted employees.

*Example.* Commuter Railroad A has contracted with Freight Railroad B to have Freight Railroad B perform all of Commuter Railroad A's train operations. Commuter Railroad A must report to FRA, under Commuter Railroad A's name and railroad code/identifier, all accidents and incidents arising from Commuter Railroad A's railroad operations, even though the operations are actually conducted by employees of Freight Railroad B. This includes the reporting of injuries and illnesses to Freight Railroad B's employees that are discernably caused by events or exposures arising out of the Commuter Railroad A's operations, since Freight Railroad B's employees are railroad employees and are covered by the Railroad Retirement System. Note that Commuter Railroad A must report the contracted hours worked by Freight Railroad B employees on its monthly Form FRA 6180.55 report, in block 15 "Railroad Worker Hours."

*Example.* Commuter Railroad A has contracted with Company X to perform certain safety-sensitive service. Commuter Railroad A must report to FRA, under Commuter Railroad A's name and railroad code/identifier, all accidents and incidents arising from Commuter Railroad A's railroad operations, even though some of the operations are actually conducted by employees of Company X. This includes the reporting of injuries to Company X's employees

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that are discernably caused by an event or exposures arising out of Commuter Railroad A's operations. Note that Commuter Railroad A must not report the contracted hours worked by Company X employees on its monthly Form FRA 6180.55 report, in block 15 "Railroad Worker Hours."

*Example.* Commuter Railroad A has contracted with Freight Railroad B to have Freight Railroad B perform all of Commuter Railroad A's train operations, including the filing of Commuter Railroad A's accident/incident reports with FRA. Freight Railroad B must report to FRA, under Commuter Railroad A's name and railroad code/identifier, all accidents and incidents discernably caused by an event or exposure arising from Commuter Railroad A's railroad operations, even though the operations are actually conducted by employees of Freight Railroad B. Note that under such circumstances, the contracting railroad (Commuter Railroad A) is ultimately responsible to insure that its operations comply with Part 225. Accordingly, any enforcement action taken by FRA for non-compliance with Part 225's requirements (reporting or otherwise) will be against the contracting railroad (Commuter Railroad A), even if the incident of non-compliance was due to an act or omission of the contracted railroad (Freight Railroad B).

### **12.3.3 Form 6180.55**

As a railroad subject to Part 225, each passenger railroad must submit to FRA monthly a Form FRA 5180.55 report using an identifier unique to that passenger railroad operation. If you are a contractor who is has been contracted to perform operations for a passenger railroad, all accident/incident information associated with the operation of the passenger railroad must be reported to FRA under the reporting code/identifier of the passenger railroad. This includes all operational data, e.g., train miles, railroad worker hours, passengers transported, passenger train-miles of the passenger railroad. "Railroad worker hours" (block 15 on Form FRA 6180.55) must include hours worked by railroad employees. This includes hours worked by employees of the passenger railroad and hours worked by employees other railroads (who are covered by the Railroad Retirement System) as contractors for the passenger railroad. Hours worked by contractors who are not railroad employees are not included.

Trackage Maintenance and Repair – reporting "Railroad Worker Hours", block 15 on Form FRA F 6180.55.

If the trackage over which a passenger railroad operates is owned by the passenger railroad and maintained by employees of the passenger railroad, then railroad worker hours related to the repair and maintenance of the track must be reported to FRA under the reporting code/identifier of the passenger railroad.

If the trackage over which a passenger railroad operates is owned by the passenger railroad, but maintained by non-railroad employees of a contractor to the passenger railroad, then the railroad worker hours related to the repair and maintenance of the track are not to be reported to FRA.

If the trackage over which a passenger railroad operates is owned by the passenger railroad, but maintained by railroad employees of another railroad, who performs the track maintenance for the passenger railroad under contract, then the railroad worker hours [of the contracted railroad

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employees] related to the repair and maintenance of the track are must be reported to FRA under the reporting code/identifier of the passenger railroad.

If the trackage over which the passenger railroad operates is owned and maintained by a railroad other than the passenger railroad, then worker hours related to the maintenance of the track is not to be reported to FRA by the passenger railroad.

(See the discussion on Contractors, in section 12.2 of this Guide.) If the track is solely for the purpose of the commuter/passenger system, then all hours associated with the repair and maintenance must also be included under the “Employee Hours” category.

### ***12.3.4 Form 6180.55a***

In addition to other reportable injuries, railroads are required to report to FRA deaths, injuries, and occupational illness of railroad employees. Railroad employees are those employees that work for a railroad and are covered by the Railroad Retirement System. In the case of contracted railroad employees, contracting railroads must include in their Railroad Injury and Illness Summary (Continuation Sheet), FRA Form F 6180.55a reports to FRA deaths, injuries, and occupational illnesses of all railroad employees, this means both the contracting railroad’s employees as well as the contracted railroad’s employees. The railroad employees should be reported as Class A Worker on duty – Employee or Class B Employee not on duty. It is the contracting (i.e., reporting) railroad’s responsibility to insure that the contracted railroad notifies the contracting railroad of all reportable and accountable injuries to its employees.

### ***12.3.5 Form 6180.54***

If a railroad carrier contracts the performance of its operations out to another railroad, the contracting railroad carrier still must report all reportable rail equipment accidents/incidents on Form FRA F 6180.54, “Rail equipment accident/Incident Report” under the contracting railroad’s own unique identifier/code. The contracting railroad is responsible for insuring that the contracted railroad notifies the contracting railroad of the occurrence of all reportable rail equipment accidents/incidents. If the contracting railroad has the contracted railroad perform its accident/incident reporting function, the contracting railroad is still responsible for ensuring accurate reporting.

### ***12.3.6 Form 6180.57***

If a railroad carrier contracts the performance of its operations out to another railroad, the contracting railroad carrier still must report all reportable rail equipment accidents/incidents on Form FRA F 6180.57, “Highway-Rail Grade Crossing Accident/Incident Report.” under the contracting railroad’s own unique identifier/code. The contracting railroad is responsible for insuring that the contracted railroad notifies the contracting railroad of the occurrence of all highway-rail grade crossing accidents/incidents. If the contracting railroad has the contracted railroad perform its accident/incident reporting function, the contracting railroad is still responsible for ensuring accurate reporting.

### **13. Form FRA F 6180.107 - Alternative Record for Illnesses Claimed to be Work-Related**

#### **13.1 Purpose**

The purpose of this form is to report railroad employee-claimed occupational illness where the process of gathering the information is not available in traditional processing, e.g., a class action law suit or other unusual circumstances. The Form FRA F 6180.98 should be used for recording occupational illness whenever the normal flow of information is available to complete the form, regardless of determination of work relationship. The narrative of the Form FRA F 6180.107 can state that the case is in dispute with the germane facts and qualified reasons.

FRA requires the recording of these cases to establish an audit trail for employee occupational illness cases that come to the attention of the railroad through blind lawsuits and have insufficient information to complete a Form FRA F 6180.98. It also serves as a tool for FRA Safety Assurance and Compliance officers to use during reviews to determine if proper reporting decisions are being made.

#### **13.2 Provision**

Each railroad may maintain a Form FRA F 6180.107, or alternate railroad-designed record in place of a Form FRA F 6180.98, only for those claimed occupational illnesses for which the railroad has not received, from the employee or their representative, information sufficient to determine whether the occupational illness is work-related.

When a railroad does not receive information sufficient to determine whether a claimed occupational illness case is accountable or reportable, the railroad shall make a good faith effort to obtain the necessary information by December 1 of the next calendar year.

The alternative railroad-designed record may be used in lieu of the Alternative Record for Illnesses Claimed to Be Work-Related (Form FRA F 6180.107). Any such alternative record shall contain all of the information required on the Alternative Record for Illnesses Claimed to Be Work-Related. Although this information may be displayed in a different order from that on the Alternative Record for Illnesses Claimed to Be Work-Related, the order of the information shall be consistent from one such record to another, and the order chosen by the railroad shall be consistent for each of the railroad's reporting establishments. Railroads may list additional information on the alternative record beyond the information required on the Alternative Record for Illnesses Claimed to Be Work-Related.

*Time limit to record initial claim of occupational illness.* Each railroad shall enter each illness claimed to be work related on Form FRA F 6180.107 (or alternative record) as early as practicable, but no later than 7 working days after receiving information or acquiring knowledge that an employee is claiming they have incurred an occupational illness.

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*Time limit to record additional information regarding a claim of occupational illness.* Within 7 calendar days of receiving additional information regarding a claimed occupational illness case, each railroad shall document receipt of the information, including date received and type of document/information received, in narrative block 19 of Form FRA F 6180.107.

*Time limit to re-evaluate record initial claim of occupational illness after receiving additional information.* Within 30 calendar days of receiving additional information regarding a claimed occupational illness, each railroad shall re-evaluate the claimed occupational illness to determine work-relatedness, taking into account the new information, and document any findings resulting from the re-evaluation in narrative block 19 of Form FRA F 6180.107.

*Cases determined to be reportable.* Once it has been determined that a particular case is accountable or reportable, the railroad must record the information on Form FRA F 6180.98 within 7 days of the date the determination is made; retain the Railroad Employee Injury and/or Illness Record in accordance with § 225.27; and report the occupational illness, as applicable, in accordance with § 225.11. Once a case is reported on Form FRA F 6180.55a, it is no longer necessary to continue to update the Form FRA F 6180.107 or the Form FRA 6180.98. If the case is reported, changes to counts of days absent or restricted are to be made on Form FRA F 6180.55a, not on Form FRA F 6180.107 or Form FRA F 6180.98.

*Cases determined NOT to be reportable.* Once it has been determined that a particular case is not accountable or reportable, the railroad shall include the following information in narrative block 19 of Form FRA F 6180.107: 1) why the case does not meet reporting criteria; 2) the basis upon which the railroad made this determination; and 3) the most authoritative information the railroad relied upon to make the determination.

*Alternative record.* The alternative record shall contain all of the following information, to the extent that it is reasonably available:

1. Name of Reporting Railroad
2. Case/Incident Number (The Case/Incident Number identified in block 2 must be used on Form FRA F 6180.98 and Form FRA F 6180.55a for any case determined to be accountable or reportable)
3. Employee's Name (first, middle, last)
4. Employee's Date of Birth (mm/dd/yy)
5. Employee's Gender
6. Employee Identification Number
7. Date Employee was Hired (mm/dd/yy)
8. Employee's Home Address (Include street address, city, State and Zip code)
9. Employee's Home Telephone Number (with area code)
10. Name of Facility Where Railroad Employee Normally Reports to Work

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11. Location, or Last Known Facility, Where Employee Reports to Work
12. Job Title of Railroad Employee
13. Department to Which Employee is Assigned
14. Date on Which Employee or Representative Notified Company Personnel of Condition (mm/dd/yy)
15. Name of Railroad Official Notified
16. Title of Railroad Official Notified
17. Nature of Claimed Illness
18. Supporting Documentation
- 18a. Custodian of Documents (Name, Title, and Address)
- 18b. Location of Supporting Documentation (Although the Alternative Record for Illnesses Claimed to be Work-Related, or the alternate railroad-designed form, may not include all supporting documentation, such as medical records, the record shall note the custodian of those documents and where the supporting documents are located so that they are readily accessible to FRA upon request)
19. Narrative
20. Preparer's Name
21. Preparer's Title
22. Preparer's Telephone Number (with area code)
23. Date the record was initially signed/completed (mm/dd/yy)

### 13.3 Questions and Answers

- Q1. The only information provided to the railroad was the employee's name and Social Security number. Further attempts to complete the other data elements were rejected by the employee and/or his or her attorney. Does this meet FRA requirements?**
- A1. Yes. The railroad should continue to complete all the data elements when the information becomes available and should make a good faith effort to obtain the information. However, the railroad is not expected to continue this effort past December 1 of the year that follows the date on which the railroad first received a claim of the illness.
- Q2. The employee reported that he/she has some pain in hand/arm area due to carpal tunnel syndrome and that the job environment caused and/or aggravated the condition. The company's PLHCP has determined the employee does not have carpal tunnel, and that the employee's condition was not related to railroad employment. Should the Form FRA F 6180.107 be used?**

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- A2. No. The Form FRA F6180.98 should be used with an appropriate explanation of the PLHCP's diagnoses. This case should be treated no differently than a reported injury that the PLHCP determined to be not reportable. The Form FRA F 6180.107 is used when the information in not available, i.e., telephone number, job title, (other required fields on the Form FRA F 6180.98) are not available to the railroad, the provisions of the Form FRA F 6180.107 allow the railroad additional time to compile the information due to extenuating circumstances.



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### **Appendices**

- Appendix A Railroad Codes
  - Appendix B State Codes
  - Appendix C Train Accident Cause Codes
  - Appendix D Employee Job Codes
  - Appendix E Injury and Illness Codes
  - Appendix F Circumstance Codes
  - Appendix G FRA Regional Offices and Headquarters
  - Appendix H Forms
  - Appendix I Model Internal Control Plans, Including Model Statement of Policy Against Harrassment and Intimidation and Model Complaint Procedures
  - Appendix J Instructions and Codes for Completing “Type of Territory” (Block 30) on the Rail Equipment Accident/Incident Report (Form FRA F 6180.54)
  - Appendix K Electronic Submission of Reports to FRA
  - Appendix L Proposed Rule: 49 CFR 225
  - Appendix M Telephonic Reporting Chart
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**APPENDIX A**  
**Railroad Codes**

**APPENDIX B**  
**State Codes**

AL	Alabama	MT	Montana
AK	Alaska	NE	Nebraska
AZ	Arizona	NV	Nevada
AR	Arkansas	NH	New Hampshire
CA	California	NJ	New Jersey
CO	Colorado	NM	New Mexico
CT	Connecticut	NY	New York
DE	Delaware	NC	North Carolina
DC	District of Columbia	ND	North Dakota
FL	Florida	OH	Ohio
GA	Georgia	OK	Oklahoma
ID	Idaho	OR	Oregon
IL	Illinois	PA	Pennsylvania
IN	Indiana	RI	Rhode Island
IA	Iowa	SC	South Carolina
KS	Kansas	SD	South Dakota
KY	Kentucky	TN	Tennessee
LA	Louisiana	TX	Texas
ME	Maine	UT	Utah
MD	Maryland	VT	Vermont
MA	Massachusetts	VA	Virginia
MI	Michigan	WA	Washington
MN	Minnesota	WV	West Virginia
MS	Mississippi	WI	Wisconsin
MO	Missouri	WY	Wyoming

### APPENDIX C Train Accident Cause Codes

#### TRACK, ROADBED AND STRUCTURES

##### *Roadbed*

- T001** Roadbed settled or soft
- T002** Washout/rain/slide/flood/snow/ice damage to track
- T099** Other roadbed defects (Provide detailed description in narrative)

##### *Track Geometry*

- T101** Cross level of track irregular (at joints)
- T102** Cross level of track irregular (not at joints)
- T103** Deviation from uniform top of rail profile
- T104** Disturbed ballast section
- T105** Insufficient ballast section
- T106** Superelevation improper, excessive, or insufficient
- T107** Superelevation runoff improper
- T108** Track alignment irregular (other than buckled/sunkink)
- T109** Track alignment irregular (buckled/sunkink)
- T110** Wide gage (due to defective or missing crossties)
- T111** Wide gage (due to defective or missing spikes or other rail fasteners)
- T112** Wide gage (due to loose, broken, or defective gage rods)
- T113** Wide gage (due to worn rails)
- T199** Other track geometry defects (Provide detailed description in narrative)

##### *Rail, Joint Bar and Rail Anchoring*

- T201** Broken Rail - Bolt hole crack or break
- T202** Broken Rail - Base
- T203** Broken Rail - Weld (plant)
- T204** Broken Rail - Weld (field)
- T205** Defective or missing crossties (use code T110 if results in wide gage)
- T206** Defective spikes or missing spikes or other rail fasteners (use code T111 if results in wide gage)
- T207** Broken Rail - Detail fracture from shelling or head check
- T208** Broken Rail - Engine burn fracture
- T210** Broken Rail - Head and web separation (outside joint bar limits)
- T211** Broken Rail - Head and web separation (within joint bar limits)
- T212** Broken Rail - Horizontal split head
- T213** Joint bar broken (compromise)
- T214** Joint bar broken (insulated)
- T215** Joint bar broken (noninsulated)
- T216** Joint bolts, broken, or missing
- T217** Mismatched rail-head contour
- T218** Broken Rail - Piped rail
- T219** Rail defect with joint bar repair

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### APPENDIX C - Continued

- T220 Broken Rail - Transverse/compound fissure
- T221 Broken Rail - Vertical split head
- T222 Worn rail
- T223 Rail Condition - Dry rail, freshly ground rail
- T224 Rail defect originating from bond wire attachment (Provide description in narrative)
- T299 Other rail and joint bar defects (Provide detailed description in narrative)

#### *Frogs, Switches and Track Appliances*

- T301 Derail, defective
- T302 Expansion joint failed or malfunctioned
- T303 Guard rail loose/broken or mislocated
- T304 Railroad crossing frog, worn or broken
- T305 Retarder worn, broken, or malfunctioning
- T306 Retarder yard skate defective
- T307 Spring/power switch mechanism malfunction
- T308 Stock rail worn, broken or disconnected
- T309 Switch (hand operated) stand mechanism broken, loose, or worn
- T310 Switch connecting or operating rod is broken or defective
- T311 Switch damaged or out of adjustment
- T312 Switch lug/crank broken
- T313 Switch out of adjustment because of insufficient rail anchoring
- T314 Switch point worn or broken
- T315 Switch rod worn, bent, broken, or disconnected
- T316 Turnout frog (rigid) worn, or broken
- T317 Turnout frog (self guarded), worn or broken
- T318 Turnout frog (spring) worn, or broken
- T319 Switch point gapped (between switch point and stock rail)
- T399 Other frog, switch and track appliance defects (Provide detailed description in narrative)

#### *Other Way and Structure*

- T401 Bridge misalignment or failure
- T402 Flangeway clogged
- T403 Engineering design or construction
- T404 Catenary system defect
- T499 Other way and structure defect (Provide detailed description in narrative)

#### **SIGNAL AND COMMUNICATION**

- S001 Automatic cab signal displayed false proceed
- S002 Automatic cab signal inoperative
- S003 Automatic train control system inoperative
- S004 Automatic train-stop device inoperative
- S005 Block signal displayed false proceed
- S006 Classification yard automatic control system switch failure
- S007 Classification yard automatic control system retarder failure
- S008 Fixed signal improperly displayed (defective)
- S009 Interlocking signal displayed false proceed
- S010 Power device interlocking failure

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### APPENDIX C - Continued

- S011 Power switch failure
- S012 Radio communication equipment failure
- S013 Other communication equipment failure
- S014 Computer system design error (vendor)
- S015 Computer system configuration/management error (vendor)
- S016 Classification yard automatic control system - Inadequate or insufficient control (e.g., automatic cycling, other software/programming deficiencies, etc.)
- S099 Other signal failures (Provide detailed description in narrative)
- S101 Remote control transmitter defective
- S102 Remote control transmitter, loss of communication
- S103 Radio controlled switch communication failure
- S104 Radio controlled switch not locked effectively (Equipment Failure)

### MECHANICAL AND ELECTRICAL FAILURES

#### *Brakes*

- E00C Air hose uncoupled or burst
- E00L Air hose uncoupled or burst (LOCOMOTIVE)
- E01C Hydraulic hose uncoupled or burst
- E01L Hydraulic hose uncoupled or burst (LOCOMOTIVE)
- E02C Broken brake pipe or connections
- E02L Broken brake pipe or connections (LOCOMOTIVE)
- E03C Obstructed brake pipe (closed angle cock, ice, etc.)
- E03L Obstructed brake pipe (closed angle cock, ice, etc.) (LOCOMOTIVE)
- E04C Other brake components damaged, worn, broken, or disconnected
- E04L Other brake components damaged, worn, broken, or disconnected (LOCOMOTIVE)
- E05C Brake valve malfunction (undesired emergency)
- E05L Brake valve malfunction (undesired emergency) (LOCOMOTIVE)
- E06C Brake valve malfunction (stuck brake, etc.)
- E06L Brake valve malfunction (stuck brake, etc.) (LOCOMOTIVE)
- E07C Rigging down or dragging
- E07L Rigging down or dragging (LOCOMOTIVE)
- E08C Hand brake (including gear) broken or defective
- E08L Hand brake (including gear) broken or defective (LOCOMOTIVE)
- E0HC Hand brake linkage and/or connections broken or defective
- E0HL Hand brake linkage/Connections broken/defective (LOCOMOTIVE)
- E09C Other brake defects, cars (Provide detailed description in narrative)
- E09L Other brake defects, (Provide detailed description in narrative) (LOCOMOTIVE)
- E10L Computer controlled brake communication failure (LOCOMOTIVE)

#### *Trailer or Container on Flatcar*

- E11C Broken or defective tiedown equipment
- E12C Broken or defective container
- E13C Broken or defective trailer
- E19C Other trailer or container on flat car defects (Provide detailed description in narrative)

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### APPENDIX C - Continued

#### *Body*

- E20C Body bolster broken or defective
- E20L Body bolster broken or defective (LOCOMOTIVE)
- E21C Center sill broken or bent
- E21L Center sill broken or bent (LOCOMOTIVE)
- E22C Draft sill broken or bent
- E22L Draft sill broken or bent (LOCOMOTIVE)
- E23C Center plate broken or defective
- E23L Center plate broken or defective (LOCOMOTIVE)
- E24C Center plate disengaged from truck (car off center)
- E24L Center plate disengaged from truck unit/off center (LOCOMOTIVE)
- E25C Center pin broken or missing
- E25L Center pin broken or missing (LOCOMOTIVE)
- E26C Center plate attachment defective
- E26L Center plate attachment defective (LOCOMOTIVE)
- E27C Side sill broken
- E27L Side sill broken (LOCOMOTIVE)
- E29C Other body defects, (CAR) (Provide detailed description in narrative)
- E29L Other body defects, (LOCOMOTIVE) (Provide detailed description in narrative)

#### *Coupler and Draft System*

- E30C Knuckle broken or defective
- E30L Knuckle broken or defective (LOCOMOTIVE)
- E31C Coupler mismatch, high/low
- E31L Coupler mismatch, high/low (LOCOMOTIVE)
- E32C Coupler drawhead broken or defective
- E32L Coupler drawhead broken or defective (LOCOMOTIVE)
- E33C Coupler retainer pin/cross key missing
- E33L Coupler retainer pin/cross key missing (LOCOMOTIVE)
- E34C Draft gear/mechanism broken or defective (including yoke)
- E34L Draft gear/mechanism broken/defective (including yoke) (LOCOMOTIVE)
- E35C Coupler carrier broken or defective
- E35L Coupler carrier broken or defective (LOCOMOTIVE)
- E36C Coupler shank broken or defective (includes defective alignment control)
- E36L Coupler shank broken or defective (includes defective alignment control) (LOCOMOTIVE)
- E37C Failure of articulated connectors
- E37L Failure of articulated connectors (LOCOMOTIVE)
- E39C Other coupler and draft system defects, (CAR) (Provide detailed description in narrative)
- E39L Other coupler and draft system defects, (LOCOMOTIVE) (Provide detailed description in narrative)

#### *Truck Components*

- E40C Side bearing clearance insufficient
- E40L Side bearing clearance insufficient (LOCOMOTIVE)
- E41C Side bearing clearance excessive
- E41L Side bearing clearance excessive (LOCOMOTIVE)
- E42C Side bearing(s) broken
- E42L Side bearing(s) broken (LOCOMOTIVE)

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### APPENDIX C - Continued

- E43C Side bearing(s) missing
- E43L Side bearing(s) missing (LOCOMOTIVE)
- E44C Truck bolster broken
- E44L Truck bolster broken (LOCOMOTIVE)
- E45C Side frame broken
- E45L Side frame broken (LOCOMOTIVE)
- E46C Truck bolster stiff, improper swiveling
- E4AC Gib Clearance (lateral motion excessive)
- E4BC Truck bolster stiff (failure to slew)
- E46L Truck bolster stiff, improper lateral or improper swiveling (LOCOMOTIVE)
- E47C Defective snubbing (including friction and hydraulic)
- E47L Defective snubbing (LOCOMOTIVE)
- E48C Broken, missing, or otherwise defective springs (including incorrect repair and/or installation)
- E48L Broken, missing, or otherwise defective springs (LOCOMOTIVE)
- E4TC Truck hunting
- E4TL Truck hunting (LOCOMOTIVE)
- E49C Other truck component defects, including mismatched side frames (CAR) (Provide detailed description in narrative)
- E49L Other truck component defects, (LOCOMOTIVE) (Provide detailed description in narrative)

#### *Axles and Journal Bearings*

- E51C Broken or bent axle between wheel seats
- E51L Broken or bent axle between wheel seats (LOCOMOTIVE)
- E52C Journal (plain) failure from overheating
- E52L Journal (plain) failure from overheating (LOCOMOTIVE)
- E53C Journal (roller bearing) failure from overheating
- E53L Journal (roller bearing) failure from overheating- LOCOMOTIVE
- E54C Journal fractured, new cold break
- E54L Journal fractured, new cold break (LOCOMOTIVE)
- E55C Journal fractured, cold break, previously overheated
- E55L Journal fractured, cold break, previously overheated (LOCOMOTIVE)
- E59C Other axle and journal bearing defects (CAR) (Provide detailed description in narrative)
- E59L Other axle and journal bearing defects (LOCOMOTIVE) (Provide detailed description in narrative)

#### *Wheels*

- E60C Broken flange
- E60L Broken flange (LOCOMOTIVE)
- E61C Broken rim
- E61L Broken rim (LOCOMOTIVE)
- E62C Broken plate
- E62L Broken plate (LOCOMOTIVE)
- E63C Broken hub
- E63L Broken hub (LOCOMOTIVE)
- E64C Worn flange
- E64L Worn flange (LOCOMOTIVE)
- E65C Worn tread
- E65L Worn tread (LOCOMOTIVE)
- E66C Damaged flange or tread (flat)
- E66L Damaged flange or tread (flat) (LOCOMOTIVE)



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### APPENDIX C - Continued

- E67C Damaged flange or tread (build up)
- E67L Damaged flange or tread (build up) (LOCOMOTIVE)
- E68C Loose wheel
- E68L Loose wheel (LOCOMOTIVE)
- E6AC Thermal crack, flange or tread
- E6AL Thermal crack, flange or tread (LOCOMOTIVE)
- E69C Other wheel defects (CAR) (Provide detailed description in narrative)
- E69L Other wheel defects (LOCOMOTIVE) (Provide detailed description in narrative)

#### *Locomotives*

- E70L Running gear failure (LOCOMOTIVE)
- E71L Traction motor failure (LOCOMOTIVE)
- E72L Crank case or air box explosion (LOCOMOTIVE)
- E73L Oil or fuel fire (LOCOMOTIVE)
- E74L Electrically caused fire (LOCOMOTIVE)
- E75L Current collector system (LOCOMOTIVE)
- E76L Remote control equipment inoperative (LOCOMOTIVE)
- E77L Broken or defective swing hanger or spring plank (LOCOMOTIVE)
- E78L Pantograph defect (LOCOMOTIVE)
- E7AL On-board computer - failure to respond (LOCOMOTIVE)
- E7BL Third rail shoe or shoe beam (LOCOMOTIVE)
- E79L Other locomotive defects (Provide detail description in narrative)

#### *Doors*

- E80C Box car plug door open
- E81C Box car plug door, attachment defective
- E82C Box car plug door, locking lever not in place
- E83C Box car door, other than plug, open
- E84C Box car door, other than plug, attachment defective
- E85C Bottom outlet car door open
- E86C Bottom outlet car door attachment defective
- E89C Other car door defects (Provide detail description in narrative)

#### *General Mechanical and Electrical Failures*

- E99C Other mechanical and electrical failures, (CAR) (Provide detailed description in narrative)
- E99L Other mechanical and electrical failures, (LOCOMOTIVE) (Provide detailed description in narrative)

### **TRAIN OPERATION - HUMAN FACTORS**

#### *Brakes, Use of*

- H008 Improper operation of train line air connections (bottling the air)
- H017 Failure to properly secure engine(s) (railroad employee)
- H018 Failure to properly secure hand brake on car(s) (railroad employee)
- H019 Failure to release hand brakes on car(s) (railroad employee)
- H020 Failure to apply sufficient number of hand brakes on car(s) (railroad employee)
- H021 Failure to apply hand brakes on car(s) (railroad employee)

## FRA Guide for Preparing Accident/Incident Reports

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### APPENDIX C - Continued

- H022 Failure to properly secure engine(s) or car(s) (non railroad employee)
- H025 Failure to control speed of car using hand brake (railroad employee)
- H099 Use of brakes, other (Provide detailed description in narrative)

#### *Employee Physical Condition*

- H101 Impairment of efficiency or judgment because of drugs or alcohol
- H102 Incapacitation due to injury or illness
- H103 Employee restricted in work or motion
- H104 Employee asleep
- H199 Employee physical condition, other (Provide detailed description in narrative)

#### *Flagging, Fixed, Hand and Radio Signals*

- H201 Blue Signal, absence of
- H202 Blue Signal, improperly displayed
- H205 Flagging, improper or failure to flag
- H206 Flagging signal, failure to comply
- H207 Hand signal, failure to comply
- H208 Hand signal improper
- H209 Hand signal, failure to give/receive
- H210 Radio communication, failure to comply
- H211 Radio communication, improper
- H212 Radio communication, failure to give/receive
- H217 Failure to observe hand signals given during a wayside inspection of moving train
- H218 Failure to comply with failed equipment detector warning or with applicable train inspection rules.
- H219 Fixed signal (other than automatic block or interlocking signal), improperly displayed.
- H220 Fixed signal (other than automatic block or interlocking signal), failure to comply.
- H221 Automatic block or interlocking signal displaying a stop indication - failure to comply.\*
- H222 Automatic block or interlocking signal displaying other than a stop indication - failure to comply.\*
- H299 Other signal causes (Provide detailed description in narrative)

**Note for Codes H221, H222, and H605: For accidents involving noncompliance by crew members with the indication of block or interlocking signals, the appropriate human factor cause relating to failure to comply with the signal should always be used as the primary cause. Code H605, "Failure to comply with restricted speed in connection with the restrictive indication of a block or interlocking signal," should be shown as the contributing cause in those accidents arising from noncompliance with block or interlocking signal conveying a restrictive indication. Code H607 may be used as the primary cause code when the accident did not involve block or interlocking signals, but arose due to noncompliance by crew members with timetable special instructions, equipment restrictions, and/or operating rules or procedures.**

#### *General Switching Rules*

- H301 Car(s) shoved out and left out of clear
- H302 Cars left foul
- H303 Derail, failure to apply or remove
- H304 Hazardous materials regulations, failure to comply
- H305 Instruction to train/yard crew improper
- H306 Shoving movement, absence of man on or at leading end of movement

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### APPENDIX C - Continued

- H307** Shoving movement, man on or at leading end of movement, failure to control
- H308** Skate, failure to remove or place
- H309** Failure to stretch cars before shoving
- H310** Failure to couple
- H311** Moving cars while loading ramp/hose/chute/cables/bridge plate, etc., not in proper position
- H312** Passed couplers (other than automated classification yard)
- H313** Retarder, improper manual operation
- H314** Retarder yard skate improperly applied
- H315** Portable derail, improperly applied
- H316** Manual intervention of classification yard automatic control system modes by operator
- H317** Humping or cutting off in motion equipment susceptible to damage, or to cause damage to other equipment
- H318** Kicking or dropping cars, inadequate precautions
- H399** Other general switching rules (Provide detailed description in narrative)

#### *Main Track Authority*

- H401** Failure to stop train in clear
- H402** Motor car or on-track equipment rules, failure to comply
- H403** Movement of engine(s) or car(s) without authority (railroad employee)
- H404** Train order, track warrant, track bulletin, or timetable authority, failure to comply
- H405** Train orders, track warrants, direct traffic control, track bulletins, radio, error in preparation, transmission or delivery
- H406** Train orders, track warrants, direct traffic control, track bulletins, written, error in preparation, transmission or delivery
- H499** Other main track authority causes (Provide detailed description in narrative)

#### *Train Handling/Train Makeup*

- H501** Improper train make-up at initial terminal
- H502** Improper placement of cars in train between terminals
- H503** Buffing or slack action excessive, train handling
- H504** Buffing or slack action excessive, train makeup
- H505** Lateral drawbar force on curve excessive, train handling
- H506** Lateral drawbar force on curve excessive, train makeup
- H507** Lateral drawbar force on curve excessive, car geometry (short car/long car combination)
- H508** Improper train make-up
- H509** Improper train inspection
- H510** Automatic brake, insufficient (H001) -- see note after cause H599
- H511** Automatic brake, excessive (H002)
- H512** Automatic brake, failure to use split reduction (H003)
- H513** Automatic brake, other improper use (H004)
- H514** Failure to allow air brakes to fully release before proceeding (H005)
- H515** Failure to properly cut-out brake valves on locomotives (H006)
- H516** Failure to properly cut-in brake valves on locomotives (H007)
- H517** Dynamic brake, insufficient (H009)
- H518** Dynamic brake, excessive (H010)
- H519** Dynamic brake, too rapid adjustment (H011)
- H520** Dynamic brake, excessive axles (H012)
- H521** Dynamic brake, other improper use (H013)
- H522** Throttle (power), improper use (H014)
- H523** Throttle (power), too rapid adjustment (H015)

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### APPENDIX C - Continued

- H524 Excessive horsepower (H016)
- H525 Independent (engine) brake, improper use (except actuation) (H023)
- H526 Failure to actuate off independent brake (H024)
- H599 Other causes relating to train handling or makeup (Provide detailed description in narrative)

**Note:** The description of the causes for codes H510 through H526 were originally found in subgroup “Brakes, Use of.” It has been decided that these causes are more appropriate to the “Train Handling/Train Makeup” subgroup. Consequently, it was necessary to assign new codes in order to maintain the coding convention and to simplify grouping of causes by computer. The original code has been appended to the description to aid in data conversion.

#### *Speed*

- H601 Coupling speed excessive
- H602 Switching movement, excessive speed
- H603 Train on main track inside yard limits, excessive speed
- H604 Train outside yard limits, in block signal or interlocking territory, excessive speed
- H605 Failure to comply with restricted speed in connection with the restrictive indication of a block or interlocking signal.
- H606 Train outside yard limits in nonblock territory, excessive speed
- H607 Failure to comply with restricted speed or its equivalent not in connection with a block or interlocking signal.
- H699 Speed, other (Provide detailed description in narrative)

#### *Switches, Use of*

- H701 Spring Switch not cleared before reversing
- H702 Switch improperly lined
- H703 Switch not latched or locked
- H704 Switch previously run through
- H705 Moveable point switch frog improperly lined
- H706 Switch improperly lined, radio controlled
- H707 Radio controlled switch not locked effectively (Human Error)
- H799 Use of switches, other (Provide detailed description in narrative)

#### *Cab Signals*

- H821 Automatic cab signal, failure to comply
- H822 Automatic cab signal cut out
- H823 Automatic train-stop device cut out
- H824 Automatic train control device cut out
- H899 Other causes relating to cab signals (provide detailed description in narrative)

#### *Miscellaneous*

- H991 Tampering with safety/protective device(s)
- H992 Operation of locomotive by uncertified/unqualified person
- H993 Human Factor - track

### APPENDIX C - Continued

**Example:** Track is inspected and an FRA defect is found; however, the track supervisor decides to delay repairs and does not slow order that location. A derailment occurs which is attributable to the defective track condition.

**Example:** A railroad employee (or a contracted employee), while using a bulldozer to rerail cars, caused damage to the rail on an adjacent main track. A train passing on this adjacent main track derailed due to the damage caused by the bulldozer operated by the railroad employee (or an employee contracted by the railroad).

**H994** Human Factor - Signal installation or maintenance error (field)

**Example:** A signal maintainer was servicing the signal system. It was later determined during the investigation of a rear-end collision that the signal maintainer made an installation/maintenance error resulting in an incorrect aspect being displayed in the wayside signal or cab signal.

**H99A** Human Factor - Signal - Train Control - Installation or maintenance error (shop).

**H99B** Human Factor - Signal - Train Control - Operator Input On-board computer incorrect data entry.

**H99C** Human Factor - Signal - Train Control - Operator Input On-board computer incorrect data provided

**H99D** Computer system design error (non vendor)

**H99E** Computer system configuration/management error (non vendor)

**H995** Human Factor - Motive power and equipment

**Example:** A car inspector observes an obvious thin flange wheel that normally requires the car to be removed from service. However, because the train is ready to leave, he elects to leave in service. The wheel splits the next switch point and the car derails.

**H996** Oversized loads or Excess Height/Width cars, misrouted or switched.

**H997** Motor car or other on-track equipment rules (other than main track authority) - Failure to Comply.

**H999** Other train operation/human factors (Provide detailed description in narrative)

### MISCELLANEOUS CAUSES NOT OTHERWISE LISTED

#### *Environmental Conditions*

**M101** Snow, ice, mud, gravel, coal, sand, etc. on track

**M102** Extreme environmental condition - TORNADO

**M103** Extreme environmental condition - FLOOD

**M104** Extreme environmental condition - DENSE FOG

**M105** Extreme environmental condition - EXTREME WIND VELOCITY

**M199** Other extreme environmental conditions (Provide detailed description in narrative)

#### *Loading Procedures*

**M201** Load shifted

**M202** Load fell from car

**M203** Overloaded car

**M204** Improperly loaded car

**M206** Trailer or container tiedown equipment improperly applied

**M207** Overloaded container/trailer on flat car

**M208** Improperly loaded container/trailer on flat car

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### APPENDIX C - Continued

**M299** Miscellaneous loading procedures (Provide detailed description in narrative)

#### *Highway-Rail Grade Crossing Accidents*

- M301** Highway user impairment because of drug or alcohol usage (as determined by local authorities, e.g., police)
- M302** Highway user inattentiveness
- M303** Highway user misjudgment under normal weather and traffic conditions
- M304** Highway user cited for violation of highway-rail grade crossing traffic laws
- M305** Highway user unawareness due to environmental factors (angle of sun, etc.)
- M306** Highway user inability to stop due to extreme weather conditions (dense fog, ice or snow packed road, etc.)
- M307** Malfunction, improper operation of train activated warning devices
- M308** Highway user deliberately disregarded crossing warning devices
- M309** Suicide (Highway-Rail Grade Crossing Accident)
- M310** Attempted Suicide (Highway-Rail Grade Crossing Accident)
- M399** Other causes (Provide detailed description in narrative)

#### *Unusual Operational Situations*

- M401** Emergency brake application to avoid accident
- M402** Object or equipment on or fouling track (motor vehicle - other than highway-rail crossing)
- M403** Object or equipment on or fouling track (livestock)
- M404** Object or equipment on or fouling track - other than above (for vandalism, see code M503)
- M405** Interaction of lateral/vertical forces (includes harmonic rock off)
- M406** Fire, other than vandalism, involving on-track equipment
- M407** Automatic hump retarder failed to sufficiently slow car due to foreign material on wheels of car being humped
- M408** Yard skate slid and failed to stop cars
- M409** Objects such as lading chains or straps fouling switches
- M410** Objects such as lading chains or straps fouling wheels
- M411** Passed couplers (automated classification yard)

#### *Other Miscellaneous*

- M501** Interference (other than vandalism) with railroad operations by non-railroad employee
- M502** Vandalism of on-track equipment, e.g., brakes released
- M503** Vandalism of track or track appliances, e.g., objects placed on track, switch thrown, etc.
- M504** Failure by non-railroad employee, e.g., industry employee, to control speed of car using hand brake
- M505** Cause under active investigation by reporting railroad (Amended report will be forwarded when reporting railroad's active investigation has been completed.)
- M506** Track damage caused by non-railroad interference with track structure
- M507** Investigation complete, cause could not be determined (When using this code, the narrative must include the reason(s) why the cause of the accident/incident could not be determined.)
- M509** Suicide (Other Miscellaneous)
- M510** Attempted suicide (Other Miscellaneous)
- M599** Other miscellaneous causes (Provide detailed description in narrative)

**APPENDIX C - Continued**

**Definitions and Guidelines to support Train Accident Cause Codes**

**1. “Fixed Signal”**

A signal of fixed location indicating a condition affecting the movement of a train or engine. Note: The definition of a “Fixed Signal” covers such signals as switch, train order, block, interlocking, semaphore, disc, stop board, yard limit boards, direct traffic control signs, or other means for displaying indications that govern the movement of a train or engine.

Codes H219 and H220 have been designed to capture accidents/incidents that result from fixed signals other than automatic block or interlocking signals. Events of this type would result from the improper display of, or failure to comply with, switch targets; train order signals that are not a part of the automatic block or interlocking signal system; semaphore signals; discs; stop boards at railroad crossings or other locations; and/or yard limit boards. Code H219 is to be used for improper display, and Code 220 for failure to comply.

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### **APPENDIX D** **Employee Job Codes**

#### **EXECUTIVES, OFFICIALS, AND STAFF ASSISTANTS**

<b>101</b>	Executives and General Officers	President, Vice President, Asst. Vice President, Controller, General Counsel, Treasurer, Director (head of subdepartment), General Supt., (subdept. head), Chief Engineer, General Manager (department or subdepartment head), Chief Medical Officer.
<b>102</b>	Corporate Staff Managers	Director (other than subdepartment head), Asst. Director, Asst. General Manager (not regional), Manager, Asst. Manager, Asst. Chief Engineer, Purchasing Agent, Asst. General Counsel, Superintendent (not division), Asst. to (corporate, executive or general officer), Executive Asst. (to corporate executive) Budget Officer.
<b>103</b>	Regional and Division Officers' Assistants and Staff Assistants	Asst. General Manager, Asst. Regional Manager, General Supt., Asst. to General Manager, Division Supt., Master Mechanic, District Engineer, Asst. Superintendent, Captain of Police, Division Engineer.
<b>104</b>	Transportation Officers/Managers	Trainmaster, Asst. Train Master, General Yardmaster, General Road Foreman, Road Foreman, Asst. Road Foreman, Chief Power Supervisor (motive).
<b>100</b>	Executives, Officials, and Staff Assistants (other)	Executives, Officials, and Staff Assistants not listed above. .

#### **PROFESSIONAL AND ADMINISTRATIVE**

<b>201</b>	Professionals (other than those reported in 101 and 102)	General Attorney, Asst. General Attorney, Attorney, Commerce Counsel, Medical Officer, Surgeon, Company Surgeon, Engineer, Architect, Chief Chemist, Nurse, General Accountant, Corporate Accountant, Supervisor Programming, Senior Computer System Specialist, Senior System Analyst, Chief Draftsman.
<b>202</b>	Subprofessionals	Draftsman, Chemist, Asst. Chemist, X-ray Technician, Supervisor Estimating, Junior Engineer, Engineering Trainee, Photographer, Computer Programmer, Computer Analyst, Market Analyst, Pricing Analyst, Employment Supervisor, Research Analyst.
<b>203</b>	Auditors, Traveling Auditors	Traveling Auditor, Accounting Specialist Auditors, Operations Traveling Auditors, Station Auditors.
<b>204</b>	General & Administrative Supervisors	General Supervisor, Supervisor, Chief Clerk, Office



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### APPENDIX D - Continued

		Supervisor, Supervisor Administration Office Manager, Supervising Clerk, Head Clerk, Asst. Chief Clerk, Supervising Cashier, Division Supervisor, Regional Supervisor, Budget Supervisor, Administrative Supervisor, Manager of Materials, Administrative Asst.
205	Sales & Traffic Representatives & Agents	Freight Traffic Agent, Coal Traffic Agent, Sales Representative, Freight Sales Representative, Freight Traffic Representative, Passenger Sales Representative.
206	Freight and Other Claims Agents and Investigators	Claim Agent, Claim Investigator, Freight Claim Agent, Freight Claim Investigator.
207	Supervising & Chief Claim Agents	Chief Claim Agent, Chief Freight Claim Agent, Asst. Chief Claim Agent, Chief District Claim Agent, District Freight Claim Agent, Chief Claim Investigator.
208	Lieutenants & Sergeants of Police	Police Lieutenant, Police Sergeant.
209	Police Officers, Watcher and Guards (Except Crossing and Bridge)	Police Officer, Patrolman, Watchman, Guard.
210	Inspectors (Except Maintenance of Way & Equipment), Other Investigators, Examiners, Instructors, and Other Agents (Except Station Agents)	Rules Examiner, Supervisor Rules, Safety Supervisor, Safety Inspector, Fire Marshall, Fire Chief, Instructor, Supervisor Procedures, Supervisor Yard Procedures, Real Estate Agent, Real Estate Supervisor, Tax Agent.
211	Buyers, and Sales Agents	Buyer, Asst. Buyer, Sales Agent, Asst. Sales Agent.
212	Clerical Technicians and Clerical Specialists	Lead Clerk, Staff Asst., (clerical, Statistician, Cashier, Teller, Asst. Statistician, Rate Clerk, Pricing Clerk, Computer Technician.
213	Office Machine and Data Equipment Operators	Machine Operator, Clerk, Computer Operator, Key punch Operator, Office Machine Technician.
214	Secretaries, Stenographers, and Typists	Secretary, Stenographer, Typists, Clerk Typists, Steno-clerk.
215	General and Other Clerks (excluding yard clerk and crew dispatcher)	File Clerk, General Clerk, Bookkeeper, Ticket Clerk, Records Clerk, Trace Clerk, Assignment Clerk, Personnel Clerk, M O W Clerks, M of W Clerks.
216	Telephone & Switchboard Operators	Switchboard Operator, Chief Operator.
217	Building & Office Attendants	Elevator Operator, Elevator Starter, Janitor, Cleaner, Porter.
218	Messengers & Office Persons	Messenger, Office Person.
219	Motor Vehicle Operators	Truck Driver, Bus Driver, Driver, Chauffeur.

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### APPENDIX D - Continued

200 Professional and Administrative (other) Professional and Administrative not listed above.

#### MAINTENANCE OF WAY AND STRUCTURES

301	Supervisors, Maintenance of Way, Structures, Communication & Signals	Roadmaster, Division Roadmaster, Supervisor Track, Supervisor Bridge and Buildings, Supervisor Communications and Signals, Asst. Supervisor, General Foreman (MW&S), Asst., General Foreman (MW&S), Master Carpenter.
302	Maintenance of Way, Structures, Communication and Signals, and Scale Inspectors	Chief Bridge & Building Inspector, Chief Scale Inspector, Bridge & Building Inspector, Roadway Equipment Inspector, Track & Roadway Inspector, Instrument Man, Roadman, Chairman, Inspector Communications & Signals, Signal Inspector.
303	Bridge and Building Gang Foreman	Gang Foreman, Lead Workman.
304	Bridge and Building Carpenters	Carpenter.
305	Bridge and Building Ironworkers	Ironworker.
306	Bridge and Building Painters	Painter, Sign Painter.
307	Masons, Bricklayers, Plasterers, and Plumbers	Mason, Bricklayer, Plasterer, Plumber, Operator, Grinder, Welder (M of W).
308	Bridge and Building Helpers and Apprentices	Carpenter Helper, Ironworker Helper, Mason Helper, Plumber Helper, Painter Helper, Apprentice Carpenter, Apprentice Ironworker, Apprentice Mason, Plumber Apprentice, Apprentice Painter, Welder Helper.
309	Bridge and Building Gang and Bridge and Building Dept. Laborers	Bridge and Building Laborer.
310	Track Gang Foreman (Extra Gang work train laborers)	Gang Foreman, Asst. Foreman.
311	Gang or Section Foreman	Gang Foreman, Asst. Foreman, Section Foreman.
312	Extra Gang Laborers	Trackman, Fence Laborer.
313	Section Laborers	Track, Track and Roadway Section Laborer.
314	Machine Operators	Craneman, Portable Equipment Engineer, Portable Equipment Operator, Helper.

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### APPENDIX D - Continued

315	Gang Foreman, Communications	Gang Foreman, Asst. Gang Foreman, Lead Signal Maintainer.
316	Signalmen & Signal Maintainers	Signalman, Signal Maintainer.
317	Linemen, Groundmen, and Communications Craftsman	Electrical Worker (Lineman), Electrical Worker (Groundman Communications Maintainer).
318	Assistant Signalmen and Assistant Signal Maintainers	Asst. Signalman, Asst. Signal Maintainer.
319	Signal Helpers and Signal Maintainer Helpers	Signalman Helper, Signal Maintainer Helper.
320	Camp Car Cooks	Camp Car Cook, Camp Car Helpers.
300	Maintenance of Way and Structures	Maintenance of Way and Structures not listed above.

### MAINTENANCE OF EQUIPMENT AND STORES

401	Supervisors and General Foremen Maintenance of Equipment	General Foreman Shop, General Foreman Engine house, General Foreman Diesel Terminal, Asst. General Foreman (M of E).
402	Supervisors and General Foremen, Materials and Stores	Supervisor Materials, Asst. Supervisor, Materials, General Foreman Stores, General Foreman Reclamation Plant, Asst. General Foreman.
403	Equipment, Shop, Electrical Inspectors	Chief Electrical Inspector, Chip Shop & Equipment Inspector, Electrical Inspector, Inspector Diesel Locomotive, Fuel Inspector.
404	Materials and Supplies Inspectors	Materials & Supplies Inspector, Chief Materials & Supplies Inspector, Timber Inspector, Tie Inspector.
405	Storekeeper	Storekeeper, Assistant, Storekeeper, Materials Clerk, Store Clerk.
406	Gang Foremen, Maintenance of Equipment	Gang Foreman.
407	Blacksmith	Blacksmith.
408	Boilermakers	Boilermaker.
409	Carmen (Freight)	Car Repairman, Car Inspector, Carman, Painter.
410	Carmen (Other)	Carman.
411	Electrical Workers (A)	Electrician, Electrical Worker.
412	Electrical Workers (B)	Crane Operator, Lead Dispatcher, Power Station Operator,

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### APPENDIX D - Continued

		Asst. Power Director.
413	Electrical Workers (C)	Coal and Ore Elevator Operator (electrical), Grain Elevator Operator (electrical).
414	Machinists	Machinist.
415	Sheet Metal Workers	Sheet Metal Worker.
416	Skilled Trades, Helpers, Maintenance of Equipment and Stores	Helper.
417	Apprentices, Maintenance of Equipment and Stores	Apprentice, Helper Apprentice.
418	Coach Cleaners	Coach Cleaner.
419	Laborers: Shops, Engine houses, and Power Plants	Laborer.
420	Gang Foreman, Materials and Stores	Gang Foreman.
421	Equipment Operators and General Laborers, Materials and Stores	Laborer, Materials Handler, Equipment Operators, Machine Operators.
422	Stationary Engineers	Chief Engineer (Steam Plant), Engineer, Stationary Engineer.
423	Stationary Fireman	Stationary Fireman, Power Equipment Operator, Helper, Oiler.
400	Maintenance of Equipment and Stores (other)	Maintenance of Equipment and Stores not listed above.

### TRANSPORTATION, OTHER THAN TRAIN AND ENGINE

501	Transportation Supervisor and Chief Train Dispatcher	Chief Train Dispatcher, Supervisor Train Operations, Transportation Supervisor, Supervisor Train Operations, Supervisor Locomotive & Car Distribution, Asst. Chief Train Dispatcher.
502	Train Dispatchers	Train Dispatcher.
503	Station, Freight and Passenger Agents	Supervising Station Agent, Asst. Supervising Station Agent, Station Agent, Freight Agent, Passenger Agent, Ticket Agent, Traveling Agent, Agent Operators.
504	Chief Operators and Wire Chiefs	Supervising Operator, Chief Operator, Asst. Supervising Operator, Wire Chief.
505	Clerk Operators, Towermen, Train Directors	Clerk Operator, Block Operator, Operator, Towerman, Train Directors.

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### APPENDIX D - Continued

506	Station Masters and Asst., Supervising Baggage Agents, Baggage Agents and Asst.	Station Master, Asst. Station Master, Supervising Baggage Agent, Baggage Agent, Asst. Baggage Agent, Parcel Room Agent.
507	Baggage, Parcel Room and Station Attendants	Baggage Attendant, Parcel Room Attendant, Station Attendant, Gateman, Announcer, Station Usher, Red Cap, Information Bureau Attendant.
508	General and Assistant General Foremen, Stations, Warehouses, Grain Elevators, and Docks	General Foreman, Asst. General Foreman.
509	Gang Foremen, Stations, Warehouses, Grain Elevators and Docks	Gang Foreman.
510	Grain Elevator and Dock Laborers	Laborer.
511	Station and Warehouse Laborers	Loader, Sealer.
512	Truckers (Station, Warehouse & Platforms).	Trucker.
513	Food and Lodging Manager, Supervisors	Manager Lodging House, Restaurant Manager, Dining Car Supervisor, Dining Car Steward.
514	Transportation and Dining Service Inspectors	Instructor Chef, Restaurant Inspectors, Freight Service Inspector, Baggage Inspector.
515	Waiters and Kitchen Helpers (Restaurant and Dining Car)	Waiter-in-charge, Waiter.
516	Chefs and Cooks (Restaurant and Dining Car)	Chef, Cook.
517	Marine Officers and Workers and Shore Workers	Captain, Engineer, Mate, Deckhand, Oiler Purser, Boat Master, Fireman, Wharf Master, Able Seaman, Baggage man, Boat Dispatcher.
518	Train Attendants	Porter, Buffet Lounge Attendant, Stewardess.
519	Bridge Operators and Helpers	Bridge Operator.
520	Bridge and Crossing Flagman & Gateman	Bridge Flagman, Crossing Gateman.
521	Yard Clerks	Yard Clerk, Yard Clerk Caller, Yard Demurrage Clerk, Yard Dispatcher Clerk, Piggyback Clerk.
522	Crew Dispatchers	Crew Dispatcher, Crew Caller.
523	Yardmaster & Asst. Yardmasters	Yardmaster, Asst. Yardmaster.
500	Transportation, Other Than Train and Engine (others)	Transportation, Other Than Train and Engine not listed above.

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### APPENDIX D - Continued

#### TRANSPORTATION, TRAIN AND ENGINE

<b>601</b>	Switchtenders	Switchtender.
<b>602</b>	Car Retarder Operators and Ground Service Employees	Car Retarder Operator, Skatesman, Herder, Yard Pilot.
<b>603</b>	Outside Hostlers	Outside Hostler.
<b>604</b>	Outside Hostler Helpers	Outside Hostler Helper.
<b>605</b>	Inside Hostler	Inside Hostler.
<b>606</b>	Road Passenger Conductors	Passenger Conductor.
<b>607</b>	Asst. Road Passenger Conductors and Ticket Collectors	Asst. Passenger Conductor, Ticket Collector.
<b>608</b>	Road Freight Conductors (Through Freight).	Freight Conductor, Work Train Conductor, (paid through rate).
<b>609</b>	Road Freight Conductors (Local and Way Freight)	Freight Conductor, Work Train Conductor, (paid local rate).
<b>610</b>	Lead Passenger Baggageperson	Baggageperson.
<b>611</b>	Lead Passenger Brakemen and Flagmen	Passenger Brakeman, Passenger Flagmen.
<b>612</b>	Road Freight Brakemen and Flagmen (Through Freight)	Freight Brakeman, Freight Flagman, Work Train Brakeman (paid through rate).
<b>613</b>	Road Freight Brakemen and Flagmen (Local and Way Freight)	Freight Brakeman, Freight Flagman, Work Train Brakeman, (paid local rate).
<b>614</b>	Yard Conductors and Yard Foremen	Yard Conductor, Yard Foreman.
<b>615</b>	Yard Brakemen and Yard Helpers	Yard Brakeman, Yard Helper.
<b>616</b>	Road Passenger Engineers and Motormen	Passenger Engineer, Motorman Operator.
<b>617</b>	Road Freight Engineers (Through Freight).	Freight Engineer, Work Train Engineer (paid through rate).
<b>618</b>	Road Freight Engineers (Local and Way Freight).	Freight Engineer, Work Train Engineer (paid local rate).
<b>619</b>	Yard Engineers	Yard Engineer.
<b>620</b>	Road Passenger Firemen and Helpers	Passenger Fireman.

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### APPENDIX D - Continued

<b>621</b>	Road Freight Firemen and Helpers, (Through Freight)	Freight Fireman.
<b>622</b>	Road Freight Fireman and Helpers, (Local and Way Freight)	Freight Fireman.
<b>623</b>	Yard Firemen and Helpers	Yard Fireman.
<b>630</b>	Remote Control Locomotive Operator - Operating	Person operating remote control locomotive at the time of the injury regardless of any other job title.
<b>631</b>	Remote Control Locomotive Operator - Not Operating	Person carrying remote control locomotive device at the time of the injury regardless of any other job title.
<b>600</b>	Transportation, Train and Engine (other)	Transportation, Train and Engine not listed above.

### APPENDIX E Injury and Illness Codes

#### INJURIES

Use the codes on this page to identify the nature and body part affected for both fatal and nonfatal injuries. For example, a broken collarbone would be recorded as “706E.” When an individual has sustained multiple injuries, the most severe of these is to be identified. If the injuries are of equal severity, for example, cuts or abrasions on arms and legs, then the multiple location code “8” may be used.

#### NATURE OF INJURY CODES

**10** Bruise or contusion  
**13** Crushing injury  
**20** Sprain or strain  
**30** Cut/laceration or abrasion  
**35** Puncture wound (other than needle stick)  
**36** Needle stick  
**40** Electrical shock or burn  
**50** Other burns  
**60** Dislocation  
**70** Fracture (broken bone)  
**71** Rupture/tear, e.g., tendon, cartilage (for hernia, use code 92)  
**72** Gunshot/knife wounds  
**74** Animal/snake/insect bite  
**75** Dental related  
**80** Amputation

**90** FATALLY INJURED  
**91** Foreign object in eye  
**92** Hernia  
**93** Concussion/closed head injury  
**94** Nervous shock (injury related)  
**95** Internal injury  
**96** Loss of eye  
**97** Reaction from one-time external exposure to chemicals, e.g., solvents, creosote.  
**98** Symptoms due to one-time exposure to loud noise, e.g., an explosion  
**9A** Symptoms due to one-time inhalation exposure to airborne contamination that does not exceed a single duty tour and without long term or permanent consequences  
**9B** Medical removal (under OSHA medical surveillance requirements)  
**99** All other injuries

#### LOCATION OF INJURY CODES

**1** Arm or hand:  
**A** - upper arm  
**B** - elbow  
**C** - lower arm  
**D** - wrist  
**E** - hand (general)  
**F** - thumb/fingers  
**G** - finger/thumb nail(s)

**5** Head or face:  
**A** - eye  
**G** - eye area (not eyeball), e.g., eye lid  
**B** - ear and surrounding area  
**C** - nose  
**D** - mouth/teeth  
**E** - skull/scalp  
**F** - neck/throat  
**H** - jaw/chin  
**I** - cheek  
**J** - forehead  
**K** - intracranial



## FRA Guide for Preparing Accident/Incident Reports

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### APPENDIX E - Continued

#### 3 Leg or foot:

- A - upper leg
- B - knee
- C - lower leg
- D - ankle
- E - heel
- F - toes
- G - foot (general)

#### 6 Torso:

- A - spine/spinal cord
- B - upper back
- C - lower back
- D - shoulder (includes rotator cuff)
- E - collar bone
- F - ribs/sternum
- G - internal injuries
- H - external injuries - other
- I - hips/buttocks/pelvis
- J - genitalia/groin area
- K - abdomen
- L - chest

#### 8 Injuries to multiple body parts of relatively equal severity

#### 9 Other body parts

### OCCUPATIONAL ILLNESS CODES

#### *Occupational Skin Diseases or Disorders*

- 1101 Dermatitis (inflammation of the skin)
- 1102 Eczema - inflammation of the skin characterized by the formation of vesicles (blisters) which may be either acute or chronic
- 1103 Rash caused by primary irritants and sensitizers or poisonous plants
- 1104 Oil acne - sometimes known as oil folliculitis, it is an inflammation of the hair follicles caused by depositing of oil into them, resulting in inflammation, swelling, redness and pus formation
- 1105 Chrome ulcers - pitted sores of the skin that are slow or resistant to healing, caused by exposure to chromium salts
- 1107 Other occupational skin diseases or disorders
- 1109 **DEATH resulting from occupational skin diseases or disorders**

#### *Dust Diseases of the Lungs (Pneumoconioses)*

- 1111 Silicosis - caused by the depositing of dust containing free silica into the lung
- 1112 Asbestosis - caused by the presence of asbestos in the lung
- 1113 Coal worker's pneumoconiosis (formerly known as black lung) - caused by the depositing of coal dust in the lung

**APPENDIX E - Continued**

- 1114 Byssinosis (formerly known as brown lung) - caused by the depositing of cotton dust in the lung
- 1115 Pneumoconioses, other. Other lung diseases characterized by the presence of dust in the lungs and the lungs reaction to that dust.
- 1119 **DEATH resulting from dust diseases of the lungs**

***Respiratory Conditions Due to Toxic Agents***

- 1121 Pneumonitis - inflammation of the lungs
- 1122 Pharyngitis - inflammation of the throat
- 1123 Rhinitis - inflammation of the nose
- 1124 Acute congestion due to chemicals, dust, gases, or fumes
- 1125 Farmers lung
- 1126 Other respiratory conditions due to toxic agents
- 1129 **DEATH resulting from respiratory conditions due to toxic agents**

***Poisoning (Systemic Effects of Toxic Materials)***

- 1131 Poisoning by lead, mercury, cadmium, arsenic, or other metals
- 1132 Poisoning by carbon monoxide, hydrogen sulfide or other gases
- 1133 Poisoning by benzol, carbon tetrachloride, or other organic solvents
- 1134 Poisoning by insecticide sprays such as parathion, lead arsenate
- 1135 Poisoning by chemicals such as formaldehyde, plastics and resins
- 1136 Other poisoning due to the systemic effects of toxic materials
- 1139 **DEATH resulting from poisoning**

***Disorders Due to Physical Agents (Other than Toxic Materials)***

- 1141 Heat stroke/sun stroke - serious heat-related condition in which the patient often stops sweating and experiences a marked rise in core temperature

**APPENDIX E - Continued**

- 1142** Effects of ionizing radiation - refers to the various effects of ionizing radiation, e.g. gamma rays or x-rays
- 1143** Effects of non-ionizing radiation - refers to the effects of electro-magnetic radiation, e.g., radio waves, microwaves, welding flash, ultraviolet rays of the sun, etc.
- 1144** Heat exhaustion - heat-related condition of moderate degree which, if not treated, may lead to heat stroke.
- 1145** Freezing/frostbite - freezing of tissue with disruption of the blood supply
- 1146** Other disorders due to physical agents other than toxic materials
- 1149** **DEATH resulting from physical agents (other than toxic materials)**

***Disorders Due to Repeated Trauma***

- 1151** Noise-induced hearing loss - a standard threshold shift (STS). An STS is a change in hearing noise-induced hearing loss. If an employee's hearing test (audiogram) reveals that the employee has experienced a work-related STS in hearing in one or both ears, and the employee's total hearing level is 25 decibels (dB) or more above audiometric zero (averaged at 2000, 3000, and 4000 Hz) in the same ear(s) as the STS, you must report the case on Form FRA F 6180.55a.

A standard threshold shift, or STS, is defined in the occupational noise exposure standard at 29 CFR 1910.95(g)(10)(i) as a change in hearing threshold, relative to the baseline audiogram for that employee, of an average of 10 dB or more at 2000, 3000, and 4000 Hz in one or both ears.

**STS.** If the employee has never previously experienced a recordable hearing loss, you must compare the employee's current audiogram with that employee's baseline audiogram. If the employee has previously experienced a recordable hearing loss, you must compare the employee's current audiogram with the employee's revised baseline audiogram (the audiogram reflecting the employee's previous recordable hearing loss case).

**25-dB loss.** 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.

See additional instructions in Chapter 6.

- 1152** Synovitis - inflammation of the membrane around a joint or other musculoskeletal element
- 1153** Tenosynovitis - inflammation of the tendon (fibrous tissue that connects the muscle to a bone) or the membrane that surrounds it, e.g., epicondylitis or tendinitis.
- 1154** Bursitis - inflammation of the bursa (a membranous pouch that is used for cushioning the joints)

**APPENDIX E - Continued**

- 1155** Raynaud's phenomena - a symptom complex usually related to poor circulation of an extremity characterized by loss of feeling, blanching (whitening) and coolness of the part, typically a finger, toe, hand, or foot
- 1156** Carpal tunnel syndrome
- 1157** Other conditions associated with repeated motion, vibration, pressure, or repeated trauma.
- 1159** **DEATH resulting from repeated trauma**

***Other Occupational Illnesses Not Listed above***

- 1191** Anthrax - bacterial disease, typically spread from infected animals to humans
- 1192** Brucellosis - an infectious bacterial disease spread by contact with the tissues, blood, urine or fetuses of contaminated animals
- 1193** Infectious hepatitis (also known as hepatitis A) - infection of the liver, characterized by fever, abdominal pain, loss of appetite and in severe cases, jaundice
- 1194** Malignant tumors - tumors which spread beyond their original boundaries to distant organs and will generally result in death if not treated
- 1195** Benign tumors - tumors that do not spread beyond the original tumor mass except through local growth and do not pose the same risk of distant spread, disease, and death as seen in malignant tumors
- 1196** Stress related (determined by a qualified health care professional)
- 1197** Histoplasmosis/Coccidiomycosis - fungal infectious diseases
- 119E** Emotional Trauma/nervous shock
- 1198** All other occupational illnesses other than those classified above
- 1199** **DEATH resulting from other occupational illnesses**

**APPENDIX F**  
**Circumstance Codes**

- 1. Physical Act (Page F-2)**
- 2. Location - Parts I, II, and III (Page F-4)**
- 3. Event (Page F-6)**
- 4. Tools, Machinery, Appliances, Structures, Surfaces, etc. (Page F-8)**
- 5. Probable Reason for Injury/Illness (Page F-10)**

A complete record of all of factors associated with an injury or illness would be beneficial in prevention analysis. However, it is not practical, even if it were possible, to develop forms and codes that would capture every detail that may be associated with each incident. When selecting circumstance codes, use a combination that best identifies the key factors without duplicating information identified by another code. The narrative portion of the report is to be used to provide additional information concerning those items that cannot be adequately described on the coded portions of the form.

## FRA Guide for Preparing Accident/Incident Reports

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### APPENDIX F - Continued

#### PHYSICAL ACT CIRCUMSTANCE CODES

(What was the person doing when hurt?)

Select one of these codes and enter in Form F6180.55a, 5j. Physical Act.

01 Adjusting coupler	34 Handling poles
02 Adjusting drawbar	37 Handling rail
03 Adjusting, other	35 Handling tie plates
04 Applying rail anchor/fastener	36 Handling ties
B3 Arresting/apprehending/subduing	31 Handling wheels/trucks
A2 Ascending	32 Handling, other
05 Bending, stooping	A7 Hauling
06 Carrying	38 Inspecting
07 Chaining, cabling car or locomotive	39 Installing
08 Cleaning/scrubbing	40 Jumping from
09 Climbing over/on	41 Jumping onto
10 Closing	42 Laying
13 Coupling air hose	44 Lifting equipment (tools, parts, etc.)
11 Coupling electric cables	43 Lifting other material
12 Coupling steam hose	45 Lining switches
16 Crossing between	46 Lining, other
15 Crossing or crawling under	47 Loading/unloading
14 Crossing over	B6 Lying down
17 Cutting rail	48 Maintaining/servicing
18 Cutting vegetation	A8 Moving
19 Cutting, other	49 Opening
77 Derail, applying	50 Opening/closing angle cock
79 Derail, other	51 Operating
78 Derail, removing	53 Pulling
A3 Descending	52 Pulling pin lifter/operating uncoupling lever
20 Digging, excavating	54 Pushing
21 Driving (motor vehicle, forklift, etc.)	55 Reaching
A4 Exercising	56 Removing rail anchors/fasteners
22 Flagging	57 Repairing
23 Fueling	A1 Replacing
A5 Getting in	58 Riding
A6 Getting out	59 Running
25 Getting off	B2 Sanding
24 Getting on	B1 Servicing
26 Grinding	60 Sitting
74 Handbrakes, applying	B4 Sleeping
75 Handbrakes, releasing	61 Spiking (installation/removal)
76 Handbrakes, other	62 Standing
27 Handling baggage	B5 Stepped on
28 Handling car parts	80 Stepping across (passenger cars)
30 Handling locomotive parts	63 Stepping up
29 Handling material, general	64 Stepping down
33 Handling other track material/supplies	65 Stepping over

**APPENDIX F - Continued**

**PHYSICAL ACT CIRCUMSTANCE CODES**

**(Continued from previous page)**

- 66** Uncoupling air hose
- 68** Uncoupling electric cables
- 67** Uncoupling steam hose
- 69** Using hand signals
- 70** Using hand tool
- 71** Using, other
- 72** Walking
- A9** Washing
- 73** Welding (includes field welding)
- 99** Other (**Narrative must be provided**)

# FRA Guide for Preparing Accident/Incident Reports

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## APPENDIX F - Continued

### LOCATION CIRCUMSTANCE CODES

Select one code from each part and enter in Form F6180.55a, 5k. Location. Enter Part I followed by Part II, then Part III.

#### Part I of Code

Did A/I occur on or near rail right of way? If so, select code that best describes the type of track.

- |               |                                      |
|---------------|--------------------------------------|
| A Main/branch | D Industry                           |
| B Yard        | E Repair                             |
| C Siding      | Y Other track (explain in narrative) |

If A/I did not occur on or near rail right of way, select code that best describes the location.

- |                      |  |
|----------------------|--|
| G Break/lunch room   | N Parking lot                            |
| H Freight terminal   | P Passenger terminal                     |
| J Highway/roadway    | Q Repair shop                            |
| K Loading dock       | R Storage facility                       |
| L Lodging facility   | S Sidewalk/walkway                       |
| M Office environment | T Other, (off site location)             |
|                      | Z Other location (describe in narrative) |

#### Part II of Code

If A/I involved rail equipment, select code that best describes type of equipment involved.

- |  |  |
|--|--|
| 01 Camp car - moving                               | <i>Other self-propelled equipment, or equipment used in transportation</i>       |
| 02 Camp car - standing                             |  |
| 06 Freight car(s) - moving                         | 51 Automobile  |
| 05 Freight car(s) - standing                       | 65 Bus   |
| 03 Freight train - moving                          | 52 Crane, hoists, etc.   |
| 04 Freight train - standing                        | 53 Excavating machinery  |
| 07 Hy-rail/other inspection vehicle - moving       | 54 Grading/surfacing machinery   |
| 08 Hy-rail/other inspection vehicle - standing     | 55 Loaders, forklifts, tractor, etc  |
| 09 Locomotive(s), not remote controlled - standing | 64 Motorcycle  |
| 10 Locomotive(s), not remote controlled - moving   | 56 Off road vehicle - industrial   |
| 18 Locomotive(s), remote control - moving          | 57 Off road vehicle - recreational   |
| 17 Locomotive(s), remote control - standing        | 58 Other construction type equipment   |
| 12 Maintenance of way equipment - moving           | 98 Other equipment (explain in narrative)  |
| 11 Maintenance of way equipment - standing         | 97 Other operated equipment (explain in narrative)                               |
| 15 Passenger car(s) - moving                       | 59 Taxi/commercial vehicle   |
| 16 Passenger car(s) - standing                     | 66 Tractor   |
| 14 Passenger train - moving                        | 60 Truck   |
| 13 Passenger train - standing                      | 62 Van (passenger)   |
| 49 Other on-track equipment - moving               | 61 Van (utility)   |
| 50 Other on-track equipment - standing             | 63 Water vehicle, ship, boat, barge, etc.  |
|  | 99 The A/I was not associated with on-track equipment or any listed vehicle type |



## FRA Guide for Preparing Accident/Incident Reports

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### APPENDIX F - Continued

#### Part III of Code

Select the code that best identifies the location of the person whose injury/illness is being reported.

- |  |   |
|--|---|
| <b>A1</b> Alongside of on-track equipment - on ground                          | <b>C8</b> Locomotive, under                                     |
| <b>G2</b> Area between Coupled Car and Platform                                | <b>B3</b> On bridge/trestle                                     |
| <b>G3</b> Area along Car Body, other than Threshold Plate<br>and Platform Edge | <b>CD</b> On elevated work station                              |
| <b>A2</b> At work station  | <b>C3</b> On escalator  |
| <b>A5</b> Between cars/locomotives   | <b>B4</b> On highway-rail crossing                              |
| <b>A7</b> Car, in (rail car)   | <b>C5</b> On ladder   |
| <b>G4</b> Car in Vestibule   | <b>B5</b> On other rail crossing                                |
| <b>B8</b> Car, on end of (rail car)  | <b>C2</b> On platform   |
| <b>B6</b> Car, on side of (rail car)   | <b>B9</b> On pole/signal mast                                   |
| <b>CA</b> Car, on top of (rail car)  | <b>C1</b> On scaffold   |
| <b>C7</b> Car, under (rail car)  | <b>C4</b> On stairs   |
| <b>CC</b> Depot  | <b>CB</b> On top of equipment, other than ontrack equipment     |
| <b>A8</b> In elevator  | <b>G1</b> Rail Car Door Threshold Plate to Edge of Platform-Gap |
| <b>B1</b> In tower   | <b>A3</b> Track, beside   |
| <b>B2</b> In tunnel  | <b>A4</b> Track, between  |
| <b>A9</b> In/operating vehicle   | <b>B7</b> Track, on   |
| <b>A6</b> Locomotive, in cab or on walkways                                    | <b>X9</b> Other location (describe in narrative)                |
| <b>C9</b> Locomotive, on top of  |   |
| <b>C6</b> Locomotive, other location   |   |

## FRA Guide for Preparing Accident/Incident Reports

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### APPENDIX F - Continued

#### EVENT CIRCUMSTANCE CODES

Select one of these codes and enter in Form F6180.55a, 5l. Event.

- |   |   |
|---|---|
| 01 Aggravated pre-existing condition                                      | 31 Exposure to welding light  |
| 02 Apprehending/removing from property                                    | 32 Highway-rail collision/impact  |
| 04 Assaulted by coworker  | 33 Horseplay, practical joke, etc.  |
| 03 Assaulted by other   | 34 Lost balance   |
| 06 Bitten by animal   | 35 Missed handhold, grabiron, step, etc.  |
| 05 Bitten/stung by bee, spider, other insect                              | 36 Needle puncture/prick/stick  |
| 74 Blowing/falling debris   | 69 On track equipment, other incidents  |
| 07 Bodily function/sudden movement, e.g.,<br>sneezing, twisting           | 37 Other impacts - on track equipment   |
| 72 Bumped   | 38 Overexertion   |
| 73 Burned   | 41 Pushed/shoved from   |
| 81 Caught Between Equipment   | 39 Pushed/shoved into/against   |
| 79 Caught Between Machinery   | 40 Pushed/shoved onto   |
| 82 Caught Between Material  | 43 Ran into object/equipment  |
| 08 Caught in or compressed by hand tools                                  | 42 Ran into on-track equipment  |
| 09 Caught in or compressed by other machinery                             | 46 Repetitive motion - tools  |
| 12 Caught in or compressed by powered hand tools                          | 45 Repetitive motion - typing, keyboard, etc.   |
| 10 Caught in or crushed by materials                                      | 44 Repetitive motion - work processes   |
| 11 Caught in or crushed in excavation, land slide,<br>cave-in, etc.       | 47 Repetitive motion - other  |
| 68 Caught, crushed, pinched, other.                                       | 48 Rubbed, abraded, etc.  |
| 13 Cave in, slide, etc.   | 49 Shot   |
| 16 Climatic condition, exposure to environmental<br>cold                  | 50 Slack action, draft, compressive buff/coupling   |
| 15 Climatic condition, exposure to environmental<br>heat                  | 80 Slack adjustment during switching operation  |
| 14 Climatic conditions, other (e.g., high winds)                          | 52 Slipped, fell, stumbled, etc. due to climatic<br>condition (rain, snow, ice, etc.)       |
| 17 Collision - between on track equipment                                 | 51 Slipped, fell, stumbled, etc. due to irregular<br>surface, e.g., depression, slope, etc. |
| 18 Collision/impact - auto, truck, bus, van, etc.                         | 54 Slipped, fell, stumbled, etc. due to object,<br>e.g., ballast, spike, material, etc.     |
| 19 Committing vandalism/theft   | 53 Slipped, fell, stumbled, etc. on oil, grease, other<br>slippery substance                |
| 20 Defective/malfunctioning equipment                                     | 70 Slipped, fell, stumbled, other   |
| 21 Derailment   | 55 Stabbing, knifing, etc.  |
| 23 Electrical shock due to contact with 3rd rail,<br>catenary, pantograph | 56 Stepped on object  |
| 25 Electrical shock from hand tool  | 61 Struck against object  |
| 22 Electrical shock while operating welding<br>equipment                  | 77 Struck by other remote control locomotive-<br>controlled equipment                       |
| 24 Electrical shock, other  | 76 Struck by own remote control locomotive-<br>controlled equipment                         |
| 27 Exposure to chemicals - external                                       | 60 Struck by falling object   |
| 26 Exposure to fumes - inhalation   | 58 Struck by object   |
| 30 Exposure to noise - single incident                                    | 59 Struck by on-track equipment   |
| 29 Exposure to noise over time  | 57 Struck by thrown or propelled object   |
| 28 Exposure to poisonous plants   | 62 Sudden release of air  |

**APPENDIX F - Continued**

**EVENT CIRCUMSTANCE CODES**

**(Continued from previous page)**

- 75** Sudden/Unexpected Movement of tools
- 63** Sudden/unexpected movement of material
- 64** Sudden/unexpected movement of on-track equipment
- 65** Sudden/unexpected movement of vehicle
- 71** Sudden, unexpected movement, other
- 66** Sustained viewing
- 67** Thrill seeking
- 99** Other (describe in narrative)

## FRA Guide for Preparing Accident/Incident Reports

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### APPENDIX F - Continued

#### TOOLS, MACHINERY, APPLIANCES, STRUCTURES, SURFACES, ETC. CIRCUMSTANCE CODES

Select one of these codes and enter in Form F6180.55a, 5m. Tools.

59 Anchor	22 Ladder
7F Animal, insect, reptile	40 Lever
01 Baggage	51 Locomotive cab Door(s)
02 Ballast, stones, etc.	89 Locomotive cab floor
61 Bed	90 Locomotive cab seat
03 Boring tools	52 Locomotive cab electric locker doors
67 Box	53 Locomotive car-body doors
80 Brakeshoe	50 Locomotive fire extinguisher
04 Bridge/trestle	47 Locomotive horn
44 Cable	54 Locomotive radios
05 Caboose	48 Locomotive refrigerator
7E Chains, straps, tie down devices.	49 Locomotive toilet
34 Chair/seat	82 Locomotive, other
46 Chemicals, fumes, etc.	7A Luggage
35 Chock	84 MOW equipment
7H Compressor	66 Motor
7C Computer equipment	7K Motor vehicle, non rail
06 Coupler	7J Needle, syringe, sharps
83 Crane	23 Office equipment
07 Cutting tools	7G Plants, trees, foliage, etc.
08 Derail	43 Platform
09 Door	24 Power tools
1G Door, End or Side-Passenger Train	25 Pry bar
2G Door, Trap-Passenger Train	26 Rail bike
45 Electrical connections, wiring, etc.	64 Refrigerator
10 End of train device	8N Remote control transmitter
11 Floor	91 Repair shop-MOW
63 Food	85 Repair shop-locomotive
12 Fusees/torpedoes	86 Repair shop-Car
13 Grabiron	88 Rock, other than ballast
14 Ground	60 Signal equipment (gates, poles, gaffs, etc.)
15 Hand tools, digging, e.g., shovels, picks, etc.	57 Soap
16 Hand tools, gripping, e.g., pliers, tongs, clamps	38 Spike, tie plates, rail fasteners, etc
17 Hand tools, striking & nailing, e.g., hammers, mallets	27 Stair step
8F Hand tools, other	36 Step/stirrup, equipment
37 Handbrake	65 Stove
18 Highway, street, road	28 Switch
19 Hose	87 Switch machine
56 Hose connections	29 Tie
20 Inspection Pit	62 Toilet
21 Jack	30 Torch, acetylene, gas, etc.
	81 Track (Rail)

## FRA Guide for Preparing Accident/Incident Reports

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### APPENDIX F - Continued

58 Traction motor

31 Trailer/container on flat car (TOFC, COFC)

#### **TOOLS, MACHINERY, APPLIANCES, STRUCTURES, SURFACES, ETC.**

#### **CIRCUMSTANCE CODES**

**(Continued from previous page)**

7L Weapon

32 Welder - electric

7M Welder/torch, other

33 Window

99 Other (describe in narrative)

## FRA Guide for Preparing Accident/Incident Reports

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### APPENDIX F – Continued

#### PROBABLE REASON FOR INJURY/ILLNESS CIRCUMSTANCE CODES

Select one of these codes and enter in Form F6180.55a, 5n. Cause.

#### CONVENTIONAL OPERATIONS

- |   |  |
|---|--|
| <b>01</b> Environmental   | <b>11</b> Object fouling track   |
| <b>02</b> Safety equipment not worn or in place                 | <b>12</b> Outside caused (e.g., assaulted/attacked)                                      |
| <b>03</b> Procedures for operating/using equipment not followed | <b>13</b> Lack of communication  |
| <b>04</b> Equipment   | <b>14</b> Slack adjustment during switching operation                                    |
| <b>05</b> Signal  | <b>15</b> Insufficient training  |
| <b>06</b> Track   | <b>16</b> Failure to provide adequate space between equipment during switching operation |
| <b>07</b> Impairment, substance use                             | <b>17</b> Close or no clearance  |
| <b>08</b> Impairment, physical condition, e.g., fatigue         | <b>18</b> Slipped, fell, stumbled due to Gap   |
| <b>09</b> Human factor  | <b>19</b> Act of God   |
| <b>10</b> Trespassing   | <b>99</b> Undetermined   |

#### REMOTELY CONTROLLED LOCOMOTIVE(S) ENVIRONMENT

- |  |  |
|--|--|
| <b>21</b> Environmental, related to using RCL  | <b>42</b> Safety equipment not worn or in place, unrelated to using RCL  |
| <b>22</b> Safety equipment not worn or in place, related to using RCL  | <b>43</b> Procedures for operating/using equipment not followed, unrelated to using RCL                          |
| <b>23</b> Procedures for operating/using equipment not followed, related to using RCL                          | <b>44</b> Equipment, unrelated to using RCL  |
| <b>24</b> Equipment, related to using RCL  | <b>45</b> Signal, unrelated to using RCL   |
| <b>25</b> Signal, related to using RCL   | <b>46</b> Track, unrelated to using RCL  |
| <b>26</b> Track, related to using RCL  | <b>47</b> Impairment, substance use, unrelated to using RCL  |
| <b>27</b> Impairment, substance use, related to using RCL  | <b>48</b> Impairment, physical condition, e.g., fatigue, unrelated to using RCL                                  |
| <b>28</b> Impairment, physical condition, e.g., fatigue, related to using RCL                                  | <b>49</b> Human factor, unrelated to using RCL   |
| <b>29</b> Human factor, related to using RCL   | <b>50</b> Trespassing, unrelated to using RCL  |
| <b>31</b> Trespassing, related to using RCL  | <b>U1</b> Object fouling track, unrelated to using RCL   |
| <b>R1</b> Object fouling track, related to using RCL   | <b>U2</b> Outside caused (e.g., assaulted/attacked), unrelated to using RCL                                      |
| <b>R2</b> Outside caused (e.g., assaulted/attacked), related to using RCL                                      | <b>U3</b> Lack of communication, unrelated to using RCL  |
| <b>R3</b> Lack of communication, related to using RCL  | <b>U4</b> Slack adjustment during switching operation, unrelated to using RCL                                    |
| <b>R4</b> Slack adjustment during switching operation, related to using RCL                                    | <b>U5</b> Insufficient training, unrelated to using RCL  |
| <b>R5</b> Insufficient training, related to using RCL  | <b>U6</b> Failure to provide adequate space between equipment during switching operation, unrelated to using RCL |
| <b>R6</b> Failure to provide adequate space between equipment during switching operation, related to using RCL | <b>U7</b> Close or no clearance, unrelated to using RCL  |
| <b>R7</b> Close or no clearance, related to using RCL  | <b>U8</b> Act of God, unrelated to using RCL   |
| <b>R8</b> Act of God, related to using RCL   | <b>59</b> Undetermined, unrelated to using RCL   |
| <b>39</b> Undetermined, related to using RCL   |  |
| <b>41</b> Environmental, unrelated to using RCL  |  |

**APPENDIX G**  
**FRA Regional Offices and Headquarters**

<b><u>REGION</u></b>	<b><u>OFFICE</u></b>	<b><u>PHONE</u></b>
I	Regional Administrator Federal Railroad Administration 55 Broadway St., Room 1077 Cambridge, MA 02142	(617) 494-2302
II	Regional Administrator Federal Railroad Administration Baldwin Tower, Suite 660 1510 Chester Pike Crum Lynne, PA 19022	(610) 521-8200
III	Regional Administrator Federal Railroad Administration 61 Forsyth Street SW, Suite 16T20 Atlanta, GA 30303-3104	(404) 562-3800
IV	Regional Administrator Federal Railroad Administration 200 West Adams Street, Suite 310 Chicago, IL 60606	(312) 353-6203
V	Regional Administrator Federal Railroad Administration 4100 International Plaza, Suite 450 Fort Worth, TX 76109	(817) 862-2200
VI	Regional Administrator Federal Railroad Administration Department of Transportation Building 901 Locust Street, Suite 464 Kansas City, MO 64106	(816) 329-3840

## **FRA Guide for Preparing Accident/Incident Reports**

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### **APPENDIX G – Continued**

<b><u>REGION</u></b>	<b><u>OFFICE</u></b>	<b><u>PHONE</u></b>
VII	Regional Administrator Federal Railroad Administration 801 I Street, Suite 466 Sacramento, CA 95814-2559	(916) 498-6540
VIII	Regional Administrator Federal Railroad Administration 500 Broadway, Suite 240 Vancouver, WA 98660	(360) 696-7536

### **FRA HEADQUARTERS**

Office of Safety (RRS-22)  
Federal Railroad Administration  
U.S. Department of Transportation  
West Building 3rd Floor, Room W33-437  
1200 New Jersey Avenue, SE.  
Washington, DC 20590

SAFETEAM@FRA.DOT.GOV



**APPENDIX H**  
**Forms**

<b>Form FRA F 6180.55</b>	<b>Railroad Injury and Illness Summary</b>
<b>Form FRA F 6180.98</b>	<b>Railroad Employee Injury and/or Illness Record</b>
<b>Form FRA F 6180.97</b>	<b>Initial Rail Equipment Accident/Incident Record</b>
<b>Form FRA F 6180.55a</b>	<b>Railroad Injury and Illness Summary (Continuation Sheet)</b>
<b>Form FRA F 6180.54</b>	<b>Rail Equipment Accident/Incident Report</b>
<b>Form FRA F 6180.81</b>	<b>Employee Human Factor Attachment</b>
<b>Form FRA F 6180.78</b>	<b>Notice to Railroad Employee Involved in Rail Equipment Accident/Incident Attributed to Employee Human Factor: Employee Statement Supplementing Railroad Accident Report</b>
<b>Form FRA F 6180.57</b>	<b>Highway-Rail Grade Crossing Accident/Incident Report</b>
<b>Form FRA F 6180.56</b>	<b>Annual Railroad Report of Employee Hours and Casualties, by State</b>
<b>Form FRA F 6180.99</b>	<b>FRA Batch Control for Magnetic Media</b>
<b>Form FRA F 6180.107</b>	<b>Alternative Record for Illnesses Claimed to be Work-Related</b>

1. Name of Reporting Railroad				1a. Alphabetic Code		1b. Railroad Accident/Incident No.	
2. Name of Other Railroad or Other Entity with Consist Involved				2a. Alphabetic Code		2b. Railroad Accident/Incident No.	
3. Name of Railroad or Other Entity Responsible for Track Maintenance (single entry)				3a. Alphabetic Code		3b. Railroad Accident/Incident No.	
4. U.S. DOT Grade Crossing Identification Number				5. Date of Accident/Incident month   day   year		6. Time of Accident/Incident AM <input type="checkbox"/> PM <input type="checkbox"/>	
7. Type of Accident/ Incident (single entry in code box)		1. Derailment 2. Head on collision 3. Rear end collision		4. Side Collision 5. Raking collision 6. Broken train collision		7. Hwy-rail crossing 8. RR grade crossing 9. Obstruction	
						10. Explosion-detonation 11. Fire/violent rupture 12. Other impacts	
						13. Other (describe in narrative) Code	
8. Cars Carrying HAZMAT		9. HAZMAT Cars Damaged/Derailed		10. Cars Releasing HAZMAT		11. People Evacuated	
						12. Subdivision	
13. Nearest City/Town		14. Milepost (to nearest tenth)		15. State Abbr. Code		16. County	
17. Temperature (F) (Specify if minus) ° F		18. Visibility (single entry) Code 1. Dawn 3. Dusk 2. Day 4. Dark		19. Weather (single entry) Code 1. Clear 3. Rain 5. Sleet 2. Cloudy 4. Fog 6. Snow		20. Type of Track Code 1. Main 3. Siding 2. Yard 4. Industry	
21. Track Name/ Number		22. FRA Track Class (1-9, X) Code		23. Annual Track Density (gross tons in millions)		24. Time Table Direction Code 1. North 3. East 2. South 4. West	
25. Type of Equipment Consist (single entry)		1. Freight Train 2. Passenger Train-Pulling 3. Commuter Train-Pulling 4. Work train		5. Single Car 6. Cut of cars 7. Yard/switching 8. Light loco(s)		9. Maint./inspect. Car A. Spec. MoW Equip. B. Passenger Train-Pushing C. Commuter Train-Pushing	
						D. EMU E. DMU Code	
						26. Was Equipment Attended? Code 1. Yes 2. No	
28. Speed (recorded speed, if available) R - Recorded E - Estimated MPH Code		30. Type of Territory (enter code(s) that apply) Signalization (Mandatory) 1. Signaled <input type="checkbox"/> 2. Not Signaled <input type="checkbox"/> Method of Operation/Authority for Movement (Mandatory) 1. Signal Indication 2. Direct Train Control 3. Yard/Restricted Limits 4. Block Register Territory 5. Other Than Main Track Supplemental/Adjunct Codes (Mandatory*) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> * Mandatory to the extent that all applicable codes are entered				30a. Remotely Controlled Locomotive? 0 = Not a remotely controlled operation 1 = Remote control portable transmitter 2 = Remote control tower operation 3 = Remote control portable transmitter - more than one remote control transmitter Code	
29. Trailing Tons (gross tonnage, excluding power units)							
31. Principal Car/Unit		a. Initial and Number		b. Position in Train		c. Loaded (yes/no)	
(1) First Involved (derailed, struck, etc.)						32. If railroad employee(s) tested for drug/alcohol use, enter the number that were positive in the appropriate box. Alcohol   Drugs	
(2) Causing (if mechanical, cause reported)						33. Was this consist transporting passengers? (y/n)	
34. Locomotive Units (Exclude EMU, DMU, and Cab Car Locomotives.)		a. Head End		Mid Train		Rear End	
				b. Manual c. Remote		d. Manual e. Remote	
(1) Total in Train						35. Cars (Include EMU, DMU, and Cab Car Locomotives.)	
(2) Total Derailed						a. Loaded b. Pass. c. Freight d. Pass. e. Caboose	
						(1) Total in Equipment Consist	
						(2) Total Derailed	
36. Equipment Damage This Consist		37. Track, Signal, Way, & Structure Damage		38. Primary Cause Code		39. Contributing Cause Code	
Number of Crew Members				Length of Time on Duty			
40. Engineers/ Operators		41. Firemen		42. Conductors		43. Brakemen	
						44. Engineer/Operator Hrs: Mins:	
						45. Conductor Hrs: Mins:	
Casualties to:		46. Railroad Employees		47. Train Passengers		48. Others	
Fatal						49a. Special Study Block A	
Nonfatal						49b. Special Study Block B	
50. Latitude (optional)				51. Longitude (optional)			
52. Narrative Description (Be specific, and continue on separate sheet if necessary)							
53. Typed/Printed Name & Title of Preparer				54. Signature		55. Date	
NOTE: This report is part of the reporting railroad's accident report pursuant to the accident reports statute and, as such shall not "be admitted as evidence or used for any purpose in any suit or action for damages growing out of any matter mentioned in said report..." 49 U.S.C. 20903. See 49 C.F.R. 225.7 (b).							
This collection of information is mandatory under 49 CFR 225, and is used by FRA to monitor national rail safety by tracking -- on a continual basis -- all rail accidents/incidents above a stipulated dollar threshold. Public reporting burden is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing databases, gathering and maintaining the data needed, and completing and reviewing the collection of information. The information collected is a matter of public record, and no confidentiality is promised to any respondent. Please note that an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 2130-0500.							

**RAILROAD INJURY AND ILLNESS SUMMARY**

1. Name of Reporting Railroad	2. Alphabetic Code	3. Report Month & Year	4. State Alphabetic Code	5. County
6. Name of Reporting Officer			7. Official Title	
8. Address			9. Telephone (Area Code) (Number)	

10. If executed within the United States, its territories, possessions, or commonwealths:  
I declare (or certify, verify, or state) under penalty of perjury that the foregoing is true and correct.  
Executed on \_\_\_\_\_ (date).  
\_\_\_\_\_  
(Signature).

If executed without (i.e., outside of) the United States:  
I declare (or certify, verify, or state) under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.  
Executed on \_\_\_\_\_ (date).  
\_\_\_\_\_  
(Signature).

**OPERATIONAL DATA & ACCIDENT/INCIDENT COUNTS FOR REPORT MONTH**

11. Freight Train Miles	12. Passenger Train Miles	13. Yard Switching Train Miles	14. Other Train Miles
15. Railroad Worker Hours	16. Passenger Miles Operated	17. Number of Passengers Transported	

18. REPORTED CASUALTIES			19. NUMBER OF FRA FORMS ATTACHED	
Type of Person	Fatal	Nonfatal	FRA Form Number	Number Attached
Worker on duty – railroad employee			6180.54	
Railroad employees not on duty			6180.55a	
Passengers on trains			6180.56	
Nontrespassers/ on railroad property			6180.57	
Trespassers			6180.81	
Worker on duty - contractor				
Contractor - other				
Worker on duty - volunteer				
Volunteer - other				
Nontrespassers/ off railroad property				
Grand total				

20. Remarks Section. Please describe operational, environmental, or other circumstances that account for unusual fluctuations in train miles operated, employee hours, or passenger counts.

NOTE: This report is part of the reporting railroad's accident report pursuant to the accident reports statute and, as such shall not "be admitted as evidence or used for any purpose in any suit or action for damages growing out of any matter mentioned in said report. . . ." 49 U.S.C. 20903. See 49 C.F.R. 225.7 (b).

**This collection of information is mandatory under 49 CFR 225, and is used by FRA to monitor national rail safety by tracking – on a continual basis – all rail accidents/incidents above a stipulated dollar threshold. Public reporting burden is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing databases, gathering and maintaining the data needed, and completing and reviewing the collection of information. The information collected is a matter of public record, and no confidentiality is promised to any respondent. Please note that an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 2130-0500.**

**RAILROAD INJURY AND ILLNESS SUMMARY**

(Continuation Sheet)

1. Name of Reporting Railroad	2. Alphabetic Code	3. Report Month	4. Report Year

5a. Accident/Injury Number	5b. Day	5c. Time of Day	5d. County				5e. State	5f. Type Person/ Job Code	5g. Age		
5h. Drug/ Alcohol Test		5i. Injury Illness Code	5j. Physical Act	5k. Location	5l. Event	5m. Tools	5n. Cause	5o. Number of Days Away From Work	5p. Number of Days Restricted	5q. Exposure to Hazmat	5r. Special Case Codes
A	D										
5s. Latitude (optional)				5t. Longitude (optional)							
5u. Narrative (Up to 250 Characters)											

5a. Accident/Injury Number	5b. Day	5c. Time of Day	5d. County				5e. State	5f. Type Person/ Job Code	5g. Age		
5h. Drug/ Alcohol Test		5i. Injury Illness Code	5j. Physical Act	5k. Location	5l. Event	5m. Tools	5n. Cause	5o. Number of Days Away From Work	5p. Number of Days Restricted	5q. Exposure to Hazmat	5r. Special Case Codes
A	D										
5s. Latitude (optional)				5t. Longitude (optional)							
5u. Narrative (Up to 250 Characters)											

5a. Accident/Injury Number	5b. Day	5c. Time of Day	5d. County				5e. State	5f. Type Person/ Job Code	5g. Age		
5h. Drug/ Alcohol Test		5i. Injury Illness Code	5j. Physical Act	5k. Location	5l. Event	5m. Tools	5n. Cause	5o. Number of Days Away From Work	5p. Number of Days Restricted	5q. Exposure to Hazmat	5r. Special Case Codes
A	D										
5s. Latitude (optional)				5t. Longitude (optional)							
5u. Narrative (Up to 250 Characters)											

NOTE: This report is part of the reporting railroad's accident report pursuant to the accident reports statute and, as such shall not "be admitted as evidence or used for any purpose in any suit or action for damages growing out of any matter mentioned in said report. . . ." 49 U.S.C. 20903. See 49 C.F.R. 225.7 (b).

This collection of information is mandatory under 49 CFR 225, and is used by FRA to monitor national rail safety by tracking – on a continual basis – all rail accidents/incidents above a stipulated dollar threshold. Public reporting burden is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing databases, gathering and maintaining the data needed, and completing and reviewing the collection of information. The information collected is a matter of public record, and no confidentiality is promised to any respondent. Please note that an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 2130-0500.

**ANNUAL RAILROAD REPORT  
OF**

**EMPLOYEE HOURS AND CASUALTIES, BY STATE**

**OMB No. 2130-0500**

DEPARTMENT OF TRANSPORTATION  
FEDERAL RAILROAD ADMINISTRATION (FRA)

1. Reporting Railroad	2. Alphabetic Code	3. Report Year
4. Establishments Included in this Report	5. Average Employment in Report Year	

6.					
State	Employee Hours	Casualties	State	Employee Hours	Casualties
Alabama			Montana		
Alaska			Nebraska		
Arizona			Nevada		
Arkansas			New Hampshire		
California			New Jersey		
Colorado			New Mexico		
Connecticut			New York		
Delaware			North Carolina		
District of Columbia			North Dakota		
Florida			Ohio		
Georgia			Oklahoma		
Idaho			Oregon		
Illinois			Pennsylvania		
Indiana			Rhode Island		
Iowa			South Carolina		
Kansas			South Dakota		
Kentucky			Tennessee		
Louisiana			Texas		
Maine			Utah		
Maryland			Vermont		
Massachusetts			Virginia		
Michigan			Washington		
Minnesota			West Virginia		
Mississippi			Wisconsin		
Missouri			Wyoming		

7. Total Employee Hours for the Year	8. Total Casualties During the Year	
9. Typed Name and Title	10. Signature	11. Date

NOTE: This report is part of the reporting railroad's accident report pursuant to the accident reports statute and, as such shall not "be admitted as evidence or used for any purpose in any suit or action for damages growing out of any matter mentioned in said report. . . ." 49 U.S.C. 20903. See 49 C.F.R. 225.7 (b).

**This collection of information is mandatory under 49 CFR 225, and is used by FRA to monitor national rail safety by tracking – on a continual basis – all rail accidents/incidents above a stipulated dollar threshold. Public reporting burden is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing databases, gathering and maintaining the data needed, and completing and reviewing the collection of information. The information collected is a matter of public record, and no confidentiality is promised to any respondent. Please note that an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 2130-0500.**

**HIGHWAY-RAIL GRADE CROSSING  
ACCIDENT/INCIDENT REPORT**

1. Name of Reporting Railroad			1a. Alphabetic Code		1b. Railroad Accident/Incident No.	
2. Name of Other Railroad or Other Entity Filing for Equipment Involved in Train Accident/Incident			2a. Alphabetic Code		2b. Railroad Accident/Incident No.	
3. Name of Railroad or Other Entity Responsible for Track Maintenance (single entry)			3a. Alphabetic Code		3b. Railroad Accident/Incident No.	
4. U.S. DOT Grade Crossing Identification Number			5. Date of Accident/Incident month   day   year		6. Time of Accident/Incident AM <input type="checkbox"/> PM <input type="checkbox"/>	
7. Nearest Railroad Station		8. Subdivision		9. County		10. State Abbr. Code
11. City (if in a city)			12. Highway Name or Number Public <input type="checkbox"/> Private <input type="checkbox"/>			
<b>Highway User Involved</b>			<b>Rail Equipment Involved</b>			
13. Type A. Auto    C. Truck-trailer    F. Bus    J. Other motor vehicle D. Pick-up truck    G. School bus    K. Pedestrian B. Truck    E. Van    H. Motorcycle    M. Other (specify)			17. Equipment 1. Train (units pulling) 2. Train (units pushing) 3. Train (standing)		18. Position of Car Unit in Train 4. Car(s) (moving) 5. Car(s) (standing) 6. Light loco(s) (moving) 7. Light loco(s) (standing) 8. Other (specify)	
14. Vehicle Speed (est. mph at impact)		15. Direction (geographical) 1. North 2. South 3. East 4. West		19. Circumstance 1. Rail equipment struck highway user 2. Rail equipment struck by highway user		
16. Position 1. Stalled or stuck on crossing 2. Stopped on crossing 3. Moving over crossing			18. Position of Car Unit in Train 4. Car(s) (moving) 5. Car(s) (standing) 6. Light loco(s) (moving) 7. Light loco(s) (standing) 8. Other (specify)		19. Circumstance 1. Rail equipment struck highway user 2. Rail equipment struck by highway user	
20a. Was the highway user and/or rail equipment involved in the impact transporting hazardous materials? 1. Highway user 2. Rail equipment 3. Both 4. Neither			20b. Was there a hazardous materials release by 1. Highway user 2. Rail equipment 3. Both 4. Neither			
20c. State here the name and quantity of the hazardous material released, if any.						
21. Temperature (Specify if minus) ° F		22. Visibility (single entry) 1. Dawn 2. Day 3. Dusk 4. Dark		23. Weather (single entry) 1. Clear 2. Cloudy 3. Rain 4. Fog 5. Sleet 6. Snow		
24. Type of Equipment Consist (single entry) 1. Freight Train    5. Single Car    9. Maint./inspect. Car    D. EMU 2. Passenger Train-Pulling    6. Cut of cars    A. Spec. MoW Equip.    E. DMU 3. Commuter Train-Pulling    7. Yard/switching    B. Passenger Train-Pushing 4. Work train    8. Light loco(s)    C. Commuter Train-Pushing			25. Track Type Used by Rail Equipment Involved 1. Main 2. Yard 3. Siding 4. Industry		26. Track Number or Name	
27. FRA Track Class (1-9, X)		28. Number of Locomotive Units	29. Number of Cars	30. Consist Speed (Recorded speed, if available) R - Recorded    E - Estimated    MPH		31. Time Table Direction 1. North 3. East 2. South 4. West
32. Type of Crossing Warning 1. Gates    4. Wig wags    7. Crossbucks    10. Flagged by crew 2. Cantilever FLS    5. Hwy. traffic signals    8. Stop signs    11. Other (specify) 3. Standard FLS    6. Audible    9. Watchman    12. None			33. Signaled Crossing Warning (See reverse side for instructions and codes)		34. Roadway Conditions A. Dry    B. Wet    C. Snow/slush    D. Ice E. Sand, Mud, Dirt, Oil, Gravel F. Water (Standing, Moving)	
35. Location of Warning 1. Both sides 2. Side of vehicle approach 3. Opposite side of vehicle approach			36. Crossing Warning Interconnected with Highway Signals 1. Yes 2. No 3. Unknown		37. Crossing Illuminated by Street Lights or Special Lights 1. Yes 2. No 3. Unknown	
38. Highway User's Age	39. Highway User's Gender 1. Male 2. Female	40. Highway User Went Behind or in Front of Train and Struck or was Struck by Second Train 1. Yes 2. No 3. Unknown		41. Highway User 1. Went around the gate 2. Stopped and then proceeded 3. Did not stop 4. Stopped on crossing 5. Other (specify) 6. Went around/thru temporary barricade (if yes, see instructions) 7. Went thru the gate 8. Suicide/Attempted suicide		
42. Driver Passed Standing Highway Vehicle 1. Yes 2. No 3. Unknown		43. View of Track Obscured by (primary obstruction) 1. Permanent structure    3. Passing train    5. Vegetation    7. Other (specify) 2. Standing railroad equipment    4. Topography    6. Highway vehicles    8. Not obstructed				
Casualties to:		Killed	Injured	44. Driver was 1. Killed 2. Injured 3. Uninjured		45. Was Driver in the Vehicle? 1. Yes 2. No
46. Highway-Rail Crossing Users			47. Highway Vehicle Property Damage (est. dollar damage)		48. Total Number of Vehicle Occupants (including driver)	
49. Railroad Employees			50. Total Number of People on Train (include passengers and train crew)		51. Is a Rail Equipment Accident/ Incident Report Being Filed? 1. Yes 2. No	
52. Passengers on Train						
53a. Special Study Block Video Taken? <input type="checkbox"/> Yes <input type="checkbox"/> No Video Used? <input type="checkbox"/> Yes <input type="checkbox"/> No			53b. Special Study Block			
54. Narrative Description (Be specific, and continue on separate sheet if necessary)						
55. Typed Name & Title			56. Signature		57. Date	

NOTE: This report is part of the reporting railroad's accident report pursuant to the accident reports statute and, as such shall not "be admitted as evidence or used for any purpose in any suit or action for damages growing out of any matter mentioned in said report..." 49 U.S.C. 20903. See 49 C.F.R. 225.7 (b).

### INSTRUCTIONS FOR COMPLETING BLOCK 33

Only if Types 1 - 6, Item 32 are indicated, mark in Block 33 the status of the warning devices at the crossing at the time of the accident, using the following codes:

1. Provided minimum 20-second warning.
2. Alleged warning time greater than 60 seconds.
3. Alleged warning time less than 20 seconds.
4. Alleged no warning.
5. Confirmed warning time greater than 60 seconds.
6. Confirmed warning time less than 20 seconds.
7. Confirmed no warning.

If status code 5, 6, or 7 was entered, also enter a letter code explanation from the list below:

- A. Insulated rail vehicle.
- B. Storm/lightning damage.
- C. Vandalism.
- D. No power/batteries dead.
- E. Devices down for repair.
- F. Devices out of service.
- G. Warning time greater than 60 seconds attributed to accident-involved train stopping short of the crossing, but within track circuit limits, while warning devices remain continuously active with no other in-motion train present.
- H. Warning time greater than 60 seconds attributed to track circuit failure (e.g., insulated rail joint or rail bonding failure, track or ballast fouled, etc.).
- J. Warning time greater than 60 seconds attributed to other train/equipment within track circuit limits.
- K. Warning time less than 20 seconds attributed to signals timing out before train's arrival at the crossing/island circuit.
- L. Warning time less than 20 seconds attributed to train operating counter to track circuit design direction.
- M. Warning time less than 20 seconds attributed to train speed in excess of track circuit's design speed.
- N. Warning time less than 20 seconds attributed to signal system's failure to detect train approach.
- P. Warning time less than 20 seconds attributed to violation of special train operating instructions.
- R. No warning attributed to signal system's failure to detect the train.
- S. Other cause(s). Explain in Narrative Description.

**This collection of information is mandatory under 49 CFR 225, and is used by FRA to monitor national rail safety by tracking – on a continual basis – all rail accidents/incidents above a stipulated dollar threshold. Public reporting burden is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing databases, gathering and maintaining the data needed, and completing and reviewing the collection of information. The information collected is a matter of public record, and no confidentiality is promised to any respondent. Please note that an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 2130-0500.**

**NOTICE TO RAILROAD EMPLOYEE INVOLVED IN RAIL EQUIPMENT ACCIDENT/INCIDENT  
ATTRIBUTED TO EMPLOYEE HUMAN FACTOR**

EMPLOYEE STATEMENT SUPPLEMENTING RAILROAD ACCIDENT REPORT

DEPARTMENT OF TRANSPORTATION  
FEDERAL RAILROAD ADMINISTRATION (FRA)

**OMB No. 2130-0500**

**PART I - NOTICE TO RAILROAD EMPLOYEE (To be completed by reporting railroad)**

Name of Reporting Railroad	Date of Accident/Incident  ____/____/____ mo    day    year	Accident/Incident No.	Location of Accident/Incident <small>(State, nearest city/town)</small>
----------------------------	--	-----------------------	--

<b>Causes reported on Form FRA F6180.54</b>		
Applicable to this person?	Code	Description
<input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Yes <input type="checkbox"/> No		

Employee's Name (First, middle, last)	Job Title	Name of Employing Railroad
---------------------------------------	-----------	----------------------------

Employee's Home Address

**PURPOSE OF THIS FORM.** A rail accident occurred that may have at least partly been caused by human error (human factor). The railroad involved with this accident is sending you this form because it is required by federal law to send this form to any railroad employee it believes may have at least been partly responsible for causing the accident/incident.

Since the railroad has named you as an employee who may have been involved in this accident, the railroad is required by federal law to complete **Part I** of this form and give you an opportunity **within 45 days** from the date that the notice was mailed or hand delivered to you to give in **Part II** of this form your version of events relating to this accident. If you would like to complete this form but are unable to do so within the time limit, you must provide an explanation to FRA and the railroad for the need for more time. While the railroad is required by federal law to send this form to you, **you are not legally required to complete this form.** If you decide to complete the form, the railroad may, upon reviewing your supplement, decide to revise its accident report.

In **Part II** of this form, you may submit a supplemental statement to FRA on any aspect of the railroad's report. If you decide that you would like to send the railroad and FRA a statement, **please follow the INSTRUCTIONS.**

Name of Railroad Representative	Signature of Railroad Representative	Date Signed	Date Mailed/Hand Delivered
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If the employee decides to return this form to the railroad, the form should be sent to: [name and address of railroad representative]

**PART II - SUPPLEMENT - EMPLOYEE STATEMENT REGARDING RAILROAD ACCIDENT REPORT**

I would like to supplement the railroad's accident report with the following statement:


(Continue statement on separate sheet, if required, and mail with statement)

I have carefully read this statement and confirm that it is true to the best of my knowledge and belief.

Signature	Date Signed	Date Mailed/Hand Delivered to FRA: _____	Date Mailed/Hand Delivered to Railroad: _____
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Your Telephone Number Home: ( ) _____ Work: ( ) _____	Your home or mailing address
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NOTE: This Notice and Employee Supplement under 49 C.F.R. 225.12 are part of the reporting railroad's accident report to FRA pursuant to the accident reports statute and, as such, shall not "be admitted as evidence or used for any purpose in any suit or action for damages growing out of any matter mentioned in said report..." 49 U.S.C. 20903. See 49 C.F.R. 225.7 (b).



## INSTRUCTIONS TO RAILROAD EMPLOYEE REGARDING COMPLETION OF PART II OF FORM FRA F 6180.78

If you decide to complete this form, please follow these instructions:

1. Complete only Part II of this form.
2. Print or type your statement.
3. You may attach any relevant supporting documents, diagrams, photographs, or other evidence.
4. Sign and date your statement.
5. Send your original statement to the Federal Railroad Administration (FRA) at the following address:

Federal Railroad Administration,  
Operating Practices Division  
Office of Safety Assurance and Compliance (RRS-11), Stop 25  
1120 Vermont Ave., N.W., Washington, D.C. 20590

6. Send a copy of your statement to your railroad.
7. Keep a copy of your statement for your own records.
8. Additional information concerning completion of this form may be obtained at FRA's website at [www.FRA.DOT.GOV](http://www.FRA.DOT.GOV).

## FREQUENTLY ASKED QUESTIONS

Q. Who is a railroad employee?

A. FRA defines an employee for purposes of filling out this form as a Worker on Duty-Railroad Employee; Employee, Railroad Employee not on duty; Worker on Duty-Contractor; or Worker on Duty-Volunteer. If you fit into any of these categories, you are a railroad employee for purposes of filling out this form.

Q. Do I have to fill out the form?

A. No. Neither the railroad nor FRA requires you to fill out this form. Employee statements on this form are voluntary and optional, not mandatory, and deciding not to send this form to FRA and the railroad does not imply that the employee admits or endorses the railroad's conclusions as to the cause of the accident or any other allegations. See 49 C.F.R. 225.12(g).

Q. Will my statements remain confidential?

A. Information that the employee wishes to withhold from the railroad must not be included in this Supplement. If the employee wishes to provide confidential information to FRA, the employee should not use the Supplement form (part II of Form FRA F 6180.78), but rather provide such confidential information by other means, such as a letter to the employee's collective bargaining representative, or to the Federal Railroad Administration, Office of Safety Assurance and Compliance, RRS-11, 400 Seventh Street, S.W., Washington, D.C. 20590. The letter should include the name of the railroad making the allegations, the date and place of the accident, and the rail equipment accident/incident number.

Q. Is this form part of the railroad's accident report to FRA, and as such, may it be used in private litigation?

A. No. This form under 49 C.F.R. 225.12 is part of the railroad's accident report to FRA pursuant to the accident reports statute and as such shall not "be admitted as evidence or used for any purpose in any suit or action for damages growing out of any matter mentioned in said report..." 49 U.S.C. 20903. See 49 C.F.R. 225.7(b).

**Willful false statements can result in imposition of civil penalties.**

**This collection of information is mandatory under 49 CFR 225, and is used by FRA to monitor national rail safety by tracking – on a continual basis – all rail accidents/incidents above a stipulated dollar threshold. Public reporting burden is estimated to average 10 minutes (Part I) and 90 minutes (Part II) per response, including the time for reviewing instructions, searching existing databases, gathering and maintaining the data needed, and completing and reviewing the collection of information. The information collected is a matter of public record, and no confidentiality is promised to any respondent. Please note that an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 2130-0500.**

## EMPLOYEE HUMAN FACTOR ATTACHMENT

DEPARTMENT OF TRANSPORTATION  
FEDERAL RAILROAD ADMINISTRATION (FRA)

**OMB No. 2130-0500**

Name of Reporting Railroad	Railroad Accident/Incident No. (Block 1b, FRA F 6180.54)	Date of Accident/Incident (mo/day/year)
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The railroad has determined that (check only one)

- a. One or more railroad employees was the primary or a contributing cause of the accident.
- b. One or more railroad employees was not the primary or a contributing cause of the accident.
- c. It is uncertain whether one or more railroad employees was a primary or a contributing cause of the accident.

If item "b" or "c" was checked, go to the last line of the form. If item "a" was checked, complete the following:

The railroad has identified (check only one)

- 1. All the railroad employees who were the primary cause or a contributing cause of the accident/incident.
- 2. Some, but not all of the railroad employees who were the primary cause or contributing cause of the accident/incident.
- 3. None of the railroad employees who were the primary cause or a contributing cause of the accident/incident.

If item "3" above was checked, go to the last line of this form.

If item "1" or "2" was checked, complete the following for each employee identified as the primary cause or a contributing cause of the accident/incident. Attach additional pages if needed.

Name of Railroad Employee (last, first, middle)	Job Title	Railroad Code of Employing Railroad	Cause Code(s) Applicable to this Employee
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Describe why the employee was the primary cause or contributing cause of the accident/incident.

Did the employee die as a result of the accident/incident?  Yes  No

Typed Name and Title	Signature	Date
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**Note: This form under 49 C.F.R. 225.12 is part of the railroad's accident report to FRA pursuant to the accident reports statute and as such shall not "be admitted as evidence or used for any purpose in any suit or action for damages growing out of any matter mentioned in said report. . . ." 49 U.S.C. 20903. See 49 C.F.R. 225.7 (b).**

**Note: Under 49 C.F.R. 225.29, any person who violates any requirement of 49 C.F.R. Part 225 or causes the violation of any such requirement is subject to a civil penalty. Penalties may be assessed against individuals only for willful violations. A person may also be subject to criminal penalties provided for in 49 U.S.C. 21311.**

This collection of information is mandatory under 49 CFR 225, and is used by FRA to monitor national rail safety by tracking – on a continual basis – all rail accidents/incidents above a stipulated dollar threshold. Public reporting burden is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing databases, gathering and maintaining the data needed, and completing and reviewing the collection of information. The information collected is a matter of public record, and no confidentiality is promised to any respondent. Please note that an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 2130-0500.

## INSTRUCTIONS FOR COMPLETING FORM FRA F 6180.81 "EMPLOYEE HUMAN FACTOR ATTACHMENT"

### Requirements

If, in reporting a rail equipment accident/incident on Form FRA F 6180.54, a railroad cites an employee human factor as the primary cause or a contributing cause of the accident, the railroad that cited such employee human factor must complete Form FRA F 6180.81, entitled "Employee Human Factor Attachment."

The Form FRA F 6180.81 must be attached to its related Rail Equipment Accident/Incident report.

This Form is only used in connection with a reportable rail equipment accident/incident where Form FRA F 6180.54 submitted to FRA identifies an employee human factor as either the primary cause or contributing cause of the accident.

### General Instruction

Each employee identified on Form FRA F 6180.81 must be notified that he or she has been identified as a possible primary or a contributing cause of an accident. That notification is to be given on Form FRA F 6180.78. Instructions for completing Form FRA F 6180.78 are noted on the attachment to that form. You also may wish to refer to the [FRA Guide for Preparing Accident/Incident Reports](#), or FRA's website at [www.FRA.DOT.GOV](http://www.FRA.DOT.GOV) for completion of that form.

## FREQUENTLY ASKED QUESTIONS

Q. Under what circumstances must the reporting railroad complete a Form FRA F 6180.81?

A. This form should be completed only when a railroad, in reporting a rail equipment accident/incident to FRA assigns any of the cause codes listed under "Train Operation"-Human Factors as listed in Appendix C to the [FRA Guide for Preparing Accident/Incident Reports](#) as the primary cause or a contributing cause of the rail equipment accident/incident.

Q. What is the **definition of a "railroad employee"** for purposes of completing this form?

A. "Railroad Employee" means Worker on Duty-Railroad Employee (Class A), Railroad Employee not on Duty (Class B), Worker on Duty-Contractor (Class F), and Worker on Duty-Volunteer (Class H). See 49 C.F.R. 225.5, 225.12.

Q. What is the definition of "the primary cause or a contributing cause"?

A. The "primary cause or a contributing cause" is an act, omission, or physical condition such as alcohol intoxication, fatigue, or legal or illegal drug use that was the main cause or a contributing cause of the accident/incident. If an employee was intoxicated or fatigued, but the accident would have happened anyway and with the same degree of severity, then the intoxication, fatigue is not the primary or a contributing cause. If the employee's act, omission, or physical condition only remotely contributed to the accident/incident, this is still a contributing cause of the accident.

Q. Should I send a Form FRA F 6180.78 to an employee's home **if the employee died** as a result of the accident?

A. No. A Notice for an employee must not be sent if that employee has died as a result of that accident. A Notice is not required and is not recommended for an employee who has died due to any cause by the time that Notice is ready to be sent.

Q. What should I do if the railroad alleges **an employee from another railroad is the primary cause or a contributing cause of the accident**?

A. You should notify the employee's railroad that the reporting railroad alleges that the primary or a contributing cause of the accident was that employee. The employee's railroad should then promptly provide to the reporting railroad the name, title, address, and medical status of that employee.

Q. What if the reporting railroad **cannot initially identify an employee** as the primary cause or a contributing cause of an accident but subsequently does identify such employee?

A. The reporting railroad should prepare a revised Form FRA F 6180.81 and forward it to FRA. In addition, the reporting railroad, will have **15 days** from the date of the revised form to send an FRA F 6180.78 to that employee.

Q. May a reporting railroad ever **defer notice** to an employee?

A. Yes. Particularly if the employee was seriously injured, a railroad may defer notice to the employee.

Q. Must the reporting railroad attach a Form FRA F 6180.81 to the Form FRA F 6180.54 if the reporting railroad has scheduled or is **conducting a formal investigation** of the accident to determine if it was caused by human factor, but the investigation is not concluded before the filing of the regular monthly report?

A. Yes. The reporting railroad must nevertheless attach the FRA F 6180.81 to the Form FRA F 6180.54. Moreover, when completing the 6180.81 in this situation, the reporting railroad should in the "Brief Description" block, explain that the employees have not been named because the railroad is still conducting a formal investigation. Indicate whether the formal investigation is currently in progress or the date that it is scheduled to begin. Once the investigation is completed, the reporting railroad must file a "corrected copy" of the Form FRA F 6180.81 for each implicated employee.

Q. When must the reporting railroad notify the implicated employee?

A. A Notice for an employee must be sent within **45 days** from the end of the month in which the accident occurred, unless the employee has died, or in the reporting railroad's discretion, the reporting railroad should defer notice.

## INITIAL RAIL EQUIPMENT ACCIDENT/INCIDENT RECORD

DEPARTMENT OF TRANSPORTATION  
FEDERAL RAILROAD ADMINISTRATION (FRA)

**OMB No. 2130-0500**

1. Date of Accident/Incident (YY/MM/DD)		2. Time of Accident/Incident		AM	
				PM	
3. Name of Railroad			4. Incident Number		
5. Other Railroad or Entity			6. Incident Number		
7. Railroad or Other Entity Responsible for Track Maintenance			8. Incident Number		
9. Type of Accident/Incident (Derailment, Collision, Obstruction, Other)					
10. Number of Hazmat Cars Damaged or Derailed			11. Number of Hazmat Cars Releasing Product		
12. Subdivision	13. Nearest City/Town		14. County	15. State	
16. Milepost ( <i>to nearest tenth</i> )	17. Specific Site				
18. Speed		Actual	19. Train/Job Number		
		Estimated			
20. Type of Equipment (Freight, Passenger, Yard/Switching, etc.)			21. Type of Track (Main, Yard, Siding, Industry)		
22. Total Locomotive Units in Train	23. Total Locomotives Derailed		24. Total of Cars in Equipment Consist	25. Total Cars Derailed	
26. Equipment Damage ( <i>in dollars</i> )			27. Track, Signal, Way & Structure Damage ( <i>in dollars</i> )		
28. Primary Cause			29. Contributing Cause		
30. Casualties		Nonfatal	Fatal		
Worker on duty – railroad employee				Worker on duty - contractor	
Railroad employees not on duty				Contractor - other	
Passengers on trains				Worker on duty - volunteer	
Nontrespassers/on railroad property				Volunteer - other	
Trespassers				Nontrespassers/off railroad property	
31. Narrative Description (Be specific, and continue on separate sheet if necessary)					
32. Was this accident/incident reported to the FRA?      Yes <input type="checkbox"/> No <input type="checkbox"/>					
33. Name of Railroad Official		34. Signature		35. Telephone Number	36. Date initially signed/completed
<p>NOTE: This report is part of the reporting railroad's accident report pursuant to the accident reports statute and, as such shall not "be admitted as evidence or used for any purpose in any suit or action for damages growing out of any matter mentioned in said report. . . ." 49 U.S.C. 20903. See 49 C.F.R. 225.7 (b).</p>					
<p><b>This collection of information is mandatory under 49 CFR 225, and is used by FRA to monitor national rail safety by tracking – on a continual basis – all rail accidents/incidents above a stipulated dollar threshold. Public reporting burden is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing databases, gathering and maintaining the data needed, and completing and reviewing the collection of information. The information collected is a matter of public record, and no confidentiality is promised to any respondent. Please note that an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 2130-0500.</b></p>					

## RAILROAD EMPLOYEE INJURY AND/OR ILLNESS RECORD

DEPARTMENT OF TRANSPORTATION  
FEDERAL RAILROAD ADMINISTRATION (FRA)

**OMB No. 2130-0500**

1. Railroad				2. Case/Incident Number				
EMPLOYEE INFORMATION								
3. Last Name, First Name, Middle Initial			4. Date of Birth		5. Sex (M/F)	6. Employee ID Number		7. Date Hired
<b>HOME ADDRESS:</b>	8. Street Address (include Apt. No.)		9. City		10. State	11. ZIP	12. Home Telephone No. (include area code)	
<b>ESTABLISHMENT/ FACILITY WHERE EMPLOYEE NORMALLY REPORTS:</b>		13. Name of Facility						
		14. Street Address		15. City		16. State	17. ZIP	
18. Job Title				19. Department Assigned To				
ACTIVITY/INCIDENT/EXPOSURE DESCRIPTION								
<b>LOCATION WHERE ACCIDENT/ INCIDENT/ EXPOSURE OCCURRED:</b>		20. Specific Site						
		21. City		22. County		23. State	24. ZIP	
25. Is this on your premises? Yes <input type="checkbox"/> No <input type="checkbox"/>		26. Date of Occurrence	27. Time Shift Began AM <input type="checkbox"/> PM <input type="checkbox"/>		28. Time of Occurrence AM <input type="checkbox"/> PM <input type="checkbox"/>		29. Was person on duty? Yes <input type="checkbox"/> No <input type="checkbox"/>	
<b>COMPANY NOTIFICATION:</b>		30. Date that Employee Notified Company Personnel of Condition		31. Time that Employee Notified Company Personnel of Condition AM <input type="checkbox"/> PM <input type="checkbox"/>		32. Person Notified		
		33. Describe the general activity this person was engaged in prior to injury/illness.						
<p>34. Describe all factors associated with this case that are pertinent to an understanding of how it occurred. Include a discussion of the sequence of events leading up to it, and the tools, machinery, processes, material, environmental conditions, etc., involved.</p>								
<p>NOTE: This report is part of the reporting railroad's accident report pursuant to the accident reports statute and, as such shall not "be admitted as evidence or used for any purpose in any suit or action for damages growing out of any matter mentioned in said report. . . ." 49 U.S.C. 20903. See 49 C.F.R. 225.7 (b).</p>								

**INJURY/CONDITION INFORMATION**

35. Describe in detail the injury/condition that this person sustained. Include a discussion of the body parts affected. If this is a recurrence, list date of last occurrence.


36. Identify all persons and organizations used to evaluate and/or treat condition. (Include facility, provider, and address)


37. Describe all procedures, medications, therapy, etc., used/recommended for the treatment of condition:


38. Check any of the following consequences resulting from this injury/condition:

- |   |   |
|---|---|
| <input type="checkbox"/> Death. Date of: _____  | <input type="checkbox"/> Hospitalization for treatment as an inpatient. |
| <input type="checkbox"/> Restriction of work. Reportable days of restricted activity: _____ as of: _____  | <input type="checkbox"/> Multiple treatments or therapy sessions.       |
| <input type="checkbox"/> Occupational illness. Date of initial diagnosis: _____   | <input type="checkbox"/> Loss of consciousness.                         |
| <input type="checkbox"/> Instructions to obtain prescription medication, or receipt of prescription medication.   |   |
| <input type="checkbox"/> Missed a day of work or next shift. Reportable days absent from work: _____ as of: _____   |   |
| <input type="checkbox"/> Significant injury/illness, one meeting specific case criteria, or a covered data case.  |   |
| <input type="checkbox"/> Medical treatment. This includes any medical care or treatment beyond "first aid" that is given, or should have been given, regardless of who provided the treatment. "First Aid" treatment is limited to very simple procedures, e.g., application of a bandaid on minor scratches, cuts, abrasions, etc. |   |
| <input type="checkbox"/> Transfer to another job or termination of employment.  |   |

39. If any of the above consequences occurred, the injury/condition is almost always reportable to FRA on Form FRA F 6180.55a. If you believe this case does not meet the reporting criteria, you must give a brief explanation below of the basis for this decision. Was the case reported? Yes  No


40. Has this employee been provided an opportunity to review his or her file? Yes  No

41. Preparer's Name	42. Preparer's Title	43. Telephone Number	44. Date initially signed/completed
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**This collection of information is mandatory under 49 CFR 225, and is used by FRA to monitor national rail safety by tracking – on a continual basis – all rail accidents/incidents above a stipulated dollar threshold. Public reporting burden is estimated to average 60 minutes per response, including the time for reviewing instructions, searching existing databases, gathering and maintaining the data needed, and completing and reviewing the collection of information. The information collected is a matter of public record, and no confidentiality is promised to any respondent. Please note that an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 2130-0500.**

## ALTERNATIVE RECORD FOR ILLNESSES CLAIMED TO BE WORK-RELATED

DEPARTMENT OF TRANSPORTATION  
FEDERAL RAILROAD ADMINISTRATION (FRA)

OMB No. 2130-0500

1. Name of Reporting Railroad		2. Case/Incident Number	
3. Employee's Name (First, middle, last)			
4. Employee's Date of Birth (mm/dd/yy)	5. Employee's Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	6. Employee ID Number	7. Date Employee was Hired (mm/dd/yy)
8. Employee's Home Address (include street address, city, State and ZIP code)			9. Employee's Home Telephone Number (with area code)
10. Name of Facility Where Railroad Employee Normally Reports to Work		11. Location, or Last Known Facility, Where Employee Reports to Work	
12. Job Title of Railroad Employee		13. Department to Which Employee is Assigned	
14. Date on Which Employee or Representative Notified Company Personnel of Condition (mm/dd/yy)		15. Name of Railroad Official Notified	16. Title of Railroad Official Notified
17. Nature of Claimed Illness			
18. Supporting Documentation			
18.a. Custodian of Documents (Name, Title, and Address)		18.b. Location of Supporting Documentation	
19. Narrative			
20. Preparer's Name	21. Preparer's Title	22. Preparer's Telephone Number (with area code)	23. Date initially signed/completed

### QUESTIONS AND ANSWERS

Q1. The only information provided to the railroad was the employee's name and social security number. Further attempts to complete the other data elements were rejected by the employee and/or his or her attorney. Does this meet FRA requirements?

A1. Yes. The railroad should continue to complete all the data elements when the information becomes available and should make a good faith effort to obtain the information. However, the railroad is not expected to continue this effort past December 1 of the year that follows the date on which the railroad first received a claim of the illness.

NOTE: This report is part of the reporting railroad's accident report pursuant to the accident reports statute and, as such shall not "be admitted as evidence or used for any purpose in any suit or action for damages growing out of any matter mentioned in said report. . . ." 49 U.S.C. 20903. See 49 C.F.R. 225.7 (b).

**This collection of information is mandatory under 49 CFR 225, and is used by FRA to monitor national rail safety by tracking – on a continual basis – all rail accidents/incidents above a stipulated dollar threshold. Public reporting burden is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing databases, gathering and maintaining the data needed, and completing and reviewing the collection of information. The information collected is a matter of public record, and no confidentiality is promised to any respondent. Please note that an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 2130-0500.**

**APPENDIX I**

**Model Internal Control Plans, Including Model Statement of Policy  
Against Harassment and Intimidation and Model Complaint Procedures**

**Explanatory Note**

The Federal Railroad Administration's (FRA) safety regulations require railroads to adopt and comply with a written Internal Control Plan (ICP) on accident/incident reporting. (See Chapter 1 of Guide.) The intent of the ICP requirement is to ensure that the railroad's Reporting Officer has the required information to prepare accurate accident/incident reports to FRA and that employees are not afraid to provide relevant information.

Section 225.33(a) of Title 49 of the Code of Federal Regulations (49 CFR § 225.33(a)) specifies the components to be included in an ICP. **All railroads subject to 49 CFR Part 225 must have an ICP with either:**

**two components (corresponding to § 225.33(a)(1)-(2); or**

**11 components (corresponding to § 225.33(a)(1)-(11)).**

**Certain small railroads need have only a two-component ICP.** In particular, railroads that operate or own track on the general railroad system of transportation that have 15 or fewer employees covered by the hours of service statute (Title 49 U.S. Code, Chapter 211) and non-insular tourist and historic railroads that operate or own track exclusively off the general system must have a two-component ICP. (See § 225.3(b), 61 Fed. Reg. 67490 (Dec. 23, 1996).) The first component involves adopting, disseminating, and complying with a policy statement against harassment and intimidation, including a statement of the disciplinary action to be imposed for violation of this policy. The second component entails (i) having both a procedure for processing complaints of violations and a policy not to retaliate against complainants and (ii) disclosing such procedure and policy.

**Other railroads subject to Part 225 must have a full-scale ICP that includes all 11 components specified in § 225.33(a)(1)-(11).**

Primarily to assist small railroads in developing their ICPs, FRA is presenting in this appendix two model ICPs that can be used. Each contains blanks to be completed by the railroad.

**For railroads required to have only a two-component ICP, Model 1 is a suggested two-component ICP.**

**For railroads required to have an 11-component ICP, Model 2 is a suggested ICP for such railroads with fewer than 200 employees.**



**APPENDIX I – Continued**

*These models are only suggestions.* A railroad's trade organization may have its own model ICP. *There is no definitive ICP.* Large railroads, because of their complexity, may prefer to develop an ICP quite different from Model 2, and yet still be consistent with the regulation. Smaller railroads may also decide to depart from the suggested models. Details, such as the structure, forms, lines of communication, and instructions, are left to the railroad's discretion to design and implement. FRA recommends that railroads structure their ICPs in the same manner that the CFR shows the components, e.g., 49 CFR 225.33(a)(1), then 225.33(a)(2), then 225.33(a)(3), etc.

A railroad may develop some synthesis between plans and develop its own plan so long as it is consistent with the regulation. Railroads may follow any applicable model ICP provided in the Guide and are also encouraged to tailor their ICP based upon their particular operation, structure, or situation. After the ICP is put in place, if any significant changes to the railroad's internal reporting procedures occur, the ICP must be amended.

**APPENDIX I – Continued**

**Model 1:  
Model Statement of Policy against Harassment and Intimidation;  
Model Complaint Procedures**

**Policy Statement of [Name of Railroad Company]  
Concerning Complete and Accurate Reporting  
of Accidents, Incidents, Injuries, and Occupational Illnesses  
without Harassment or Intimidation**

This railroad is committed to complete and accurate reporting of all accidents, incidents, injuries, and occupational illnesses arising from the operation of the railroad, to full compliance with the letter and spirit of the Federal Railroad Administration’s accident reporting regulations, and to the principle, in absolute terms, that harassment or intimidation of any person that is calculated to discourage or prevent such person from receiving proper medical treatment or from reporting such accident, incident, injury, or illness will not be permitted or tolerated and will result in disciplinary action in the form of \_\_\_\_\_ against any employee, supervisor, manager, or officer of this railroad committing such harassment or intimidation.

This policy statement is required by Federal regulation, 49 CFR § 225.33(a)(1)-(2), and all employees, supervisory personnel, and management have been provided a copy of this Policy Statement [when starting employment and/or by its remaining posted in a conspicuous location where they can reasonably be expected to see it].

**[NOTE: 49 CFR § 225.33(a)(2) requires disclosure to all railroad employees, supervisors, and management of the railroad’s procedures for dealing with complaints of violations of the preceding policy, and the railroad’s guarantee of “whistleblower” protection to any person subject to the policy. Disclosure may be accomplished by combining the following paragraph with the preceding policy statement and disseminating the combination. Alternatively, the following information may be disclosed separately, by other means.]**

**[Complaint Procedures]**

This railroad will investigate/implement the following procedure to process all complaints from any person about the policy stated above being violated: \_\_\_\_\_  
\_\_\_\_\_. This railroad will implement the following procedure in order to impose the appropriate prescribed disciplinary actions on any employee, supervisor, manager, or officer of the railroad found to have violated the policy: \_\_\_\_\_  
\_\_\_\_\_. This railroad shall provide “whistleblower” protection to any person subject to this policy. Any act of intimidation should be reported to our railroad president/operating officer/[ title ], \_\_\_\_\_.

**APPENDIX I – Continued**

**Model 2:  
Model Internal Control Plan for Smaller Railroads**  
(suggested size: fewer than 200 employees)

**RAILROAD**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **TELEPHONE:** \_\_\_\_\_

\_\_\_\_\_ **FAX:** \_\_\_\_\_

**OTHER  
ADDRESS,  
(if any):** \_\_\_\_\_ **TELEPHONE:** \_\_\_\_\_

\_\_\_\_\_ **FAX:** \_\_\_\_\_

**FEDERAL RAILROAD ADMINISTRATION (FRA) ACCESS  
TO INTERNAL CONTROL PLAN**

The Internal Control Plan shall be maintained at the office where the railroad's accident/incident Reporting Officer conducts his or her official business. The Plan shall be available for examination and copying by Federal Railroad Administration representatives (including participating State personnel) during normal business hours.

**Policy Statement of [Name of Railroad Company]  
Concerning Complete and Accurate Reporting  
of Accidents, Incidents, Injuries, and Occupational Illnesses  
without Harassment or Intimidation**

This railroad is committed to complete and accurate reporting of all accidents, incidents, injuries, and occupational illnesses arising from the operation of the railroad, to full compliance with the letter and spirit of FRA's accident reporting regulations, and to the principle, in absolute terms, that harassment or intimidation of any person that is calculated to discourage or prevent such person from receiving proper medical treatment or from reporting such accident, incident, injury, or illness will not be permitted or tolerated and will result in the following disciplinary action

**FRA Guide for Preparing Accident/Incident Reports**

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**APPENDIX I – Continued**

against any employee, supervisor, manager, or officer of the railroad committing such harassment or intimidation.

Disciplinary Action: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The preceding Policy Statement has been disseminated to all employees, supervisory personnel, and management.

**[NOTE: 49 CFR § 225.33(a)(2) requires disclosure to all railroad employees, supervisors, and management of the railroad’s procedures for dealing with complaints of violations of the preceding policy and the railroad’s guarantee of “whistleblower” protection to any person subject to the policy. Disclosure may be accomplished by combining the following paragraph with the preceding policy statement and disseminating the combination. Alternatively, the following information may be disclosed separately, by other means.]**

**COMPLAINT PROCEDURES**

Railroad procedures to process a complaint of violation of the Policy:

\_\_\_\_\_  
\_\_\_\_\_

Railroad procedures to impose the appropriate prescribed disciplinary actions on each employee, supervisor, manager, or officer of the railroad found to have violated the Policy:

\_\_\_\_\_  
\_\_\_\_\_

\*\* These procedures have been disclosed to railroad employees, supervisors, managers, and officers, including the stipulation that “whistleblower” protection is provided to any person subject to the Policy.

**APPENDIX I – Continued**

**INTERNAL REPORTING FORMS AND PROCEDURES**

The following internal forms or computer reporting system, or both, are used for the collection and internal recording of accident/incident information:

**Forms (attached)**

- |          |          |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

Description of the internal procedures used by the railroad for the processing of forms or computerized data, or both, regarding accident/incident information:

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**INTERNAL REVIEW PROCEDURES**

Description of the internal review procedures for accident/incident information collected and reports prepared by the railroad’s safety, claims, medical, and other departments engaged in collecting and reporting accident/incident information:

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Description of internal procedures for collecting cost data and compiling costs with respect to accident/incident information:

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**FRA Guide for Preparing Accident/Incident Reports**

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**APPENDIX I – Continued**

Description of internal procedures for ensuring adequate communication between the railroad department responsible for reporting accidents/incidents to FRA and any other railroad department responsible for collecting, receiving, processing, and reporting information on accidents/incidents:

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Procedures for updating accident/incident information prior to reporting to FRA:

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After reporting to FRA, amendments to accident/incident reports are made as specified in the “FRA Guide for Preparing Accident/Incident Reports.”

ATTACHMENTS: Policy Statement  
Complaint Procedures  
Internal Reporting Forms

**RAILROAD AUDITS**

The railroad officer responsible for auditing the performance of the reporting function is:

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(Name) (Title)

A railroad audit will be conducted at least once each calendar year. For purposes of inspection and copying by the FRA, the most recent railroad audit report may be found at:

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(Location)

**FRA Guide for Preparing Accident/Incident Reports**

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**APPENDIX I – Continued**

**RAILROAD ORGANIZATION**

A. The specific departments within a railroad whose personnel regularly come into possession of information pertinent to the preparation of accident/incident reports to FRA are, for example, the medical, claims, legal, operating, mechanical, track, payroll, accounting, and personnel departments. In this railroad, the specific departments whose personnel regularly come into possession of information pertinent to the preparation of accident/incident reports to FRA are:

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B. The following persons are all of the managers and officers of the specific departments within the railroad whose departments regularly come into possession of information pertinent to the preparation of reports under Part 225.

<u>Name (optional)</u>	<u>Title</u>	<u>Department</u>	<u>Reports to</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____
7. _____	_____	_____	_____

NOTE: A current organization chart satisfies the requirement for identification of titles and chain of command under heading B.

**ACCIDENT/INCIDENT REPORTING OFFICER**

**NAME:** \_\_\_\_\_ **TITLE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **TELEPHONE:** \_\_\_\_\_  
(If different than above)

\_\_\_\_\_ **FAX:** \_\_\_\_\_

**APPENDIX I – Continued**

**CUSTODIAN(S) OF RECORDS**

When using Form FRA F6180.107 or the alternate railroad-designed form, the following must be provided:

Name(s) of Custodian(s) of Records:

Title(s) of Custodian(s) of Records:

Address(es) of Custodian(s) of Records:

Where the Documents are Located:



## FRA Guide for Preparing Accident/Incident Reports

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### **APPENDIX J**

#### **Instructions for Completing “Type of Territory” (Block 30) on the Rail Equipment Accident/Incident Report (Form FRA F 6180.54)**

The host railroad (railroad responsible for track maintenance) will determine/provide the “Type of Territory” in effect at the time of the accident. Other railroads involved should consult with the host railroad when completing this block.

The codes used to complete the Type of Territory block are dependent on the Type of Track (block 20) on the Rail Equipment Accident/Incident Report, Form FRA F 6180.54. The railroad completing the report must first determine the type of track. Once the type of track is determined, then the Type of Territory codes can be completed. Each spreadsheet is labeled by the Type of Track and has its own allowable uses.

**Block 30** “Type of Territory” of the Rail Equipment Accident/Incident Report, Form FRA F 6180.54, has five positions for five codes. Only use the Type of Territory that was in effect at the time of the accident.

- The first position—required—will indicate the type of territory (signaled or nonsignaled).
- The second position—required—will indicate the authority for movement.
- The third, fourth, and fifth positions—optional—are supplemental/adjunct codes. (They are mandatory to the extent that all applicable codes are entered). When used, they must be entered in hierarchical sequence, i.e., by order of precedence. For ease of reading, the supplemental/adjunct methods are listed in alphabetical order, followed by the code.

***Other—Narrative Required.*** This should be used when the situation cannot be adequately described with the existing codes.

The railroad responsible for track maintenance will determine/provide the Type of Track and Type of Territory that were in effect at the time of the accident.

***Direct Train Control.*** This is an FRA umbrella term and refers to modern-day derivatives of traditional timetable/train order methodology. These methods of control have greatly modernized and simplified train operations by eliminating timetable schedules, train registers, superiority, and the attendant array of complicated operating rules. These systems are predicated on the train dispatcher having direct and continuous radio contact with all trains; hence the informal name “radio train dispatching.” In place of the train order, there is a written document known variously as a track warrant, DTC clearance, OCS clearance, track permit, Form D, etc. There are two basic direct train control systems presently in use on today’s railroads: one that uses fixed blocks (i.e., the limits are constant and are identified both in the timetable and by wayside signs); and one that uses variable blocks (i.e., the limits are not constant and are created by the train dispatcher for each train).

These systems are variously identified in the industry as:

## FRA Guide for Preparing Accident/Incident Reports

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1. Track Warrant Control (TWC)
2. Direct Traffic Control (called Direct *Train* Control on some roads) (DTC)
3. Form D Control System (DCS)
4. Occupancy Control System (OCS)
5. Manual Block System (MBS)

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(**Note:** these could all be considered stand-alone methods of operation and may be shown as such.)

## FRA Guide for Preparing Accident/Incident Reports

### Type of Territory for Main Track

Position 1	Position 2	Position 3	Position 4	Position 5
Signalization	Method of Operation/ Authority for Movement	Supplemental Codes	Supplemental Codes	Supplemental Codes
1 - Signaled	1 - Signal Indication	A - Auto Cab Signals B - Auto Train Control C - Auto Train Stop D - Automatic Block Signals System G - Interlocking J - Positive Train Control L - Special Instructions Q - Traffic Control System/CTC R - Yard/Restricted Limits Z - Other – Narrative Required	A - Auto Cab Signals B - Auto Train Control C - Auto Train Stop D - Automatic Block Signals System G - Interlocking J - Positive Train Control L - Special Instructions Q - Traffic Control System/CTC R - Yard/Restricted Limits Z - Other – Narrative Required	A - Auto Cab Signals B - Auto Train Control C - Auto Train Stop D - Automatic Block Signals System G - Interlocking J - Positive Train Control L - Special Instructions Q - Traffic Control System/CTC R - Yard/Restricted Limits Z - Other – Narrative Required
1 - Signaled	2 - Direct Train Control	A - Auto Cab Signals B - Auto Train Control C - Auto Train Stop D - Automatic Block Signals System F - Direct Traffic Control G - Interlocking J - Positive Train Control L - Special Instructions N - Time Table/Train Orders P - Track Warrant Control R - Yard/Restricted Limits Z - Other – Narrative Required	A - Auto Cab Signals B - Auto Train Control C - Auto Train Stop D - Automatic Block Signals System F - Direct Traffic Control G - Interlocking J - Positive Train Control L - Special Instructions N - Time Table/Train Orders P - Track Warrant Control R - Yard/Restricted Limits Z - Other – Narrative Required	A - Auto Cab Signals B - Auto Train Control C - Auto Train Stop D - Automatic Block Signals System F - Direct Traffic Control G - Interlocking J - Positive Train Control L - Special Instructions N - Time Table/Train Orders P - Track Warrant Control R - Yard/Restricted Limits Z - Other – Narrative Required

## FRA Guide for Preparing Accident/Incident Reports

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### Type of Territory for Main Track - Continued

Position 1	Position 2	Position 3	Position 4	Position 5
Signalization	Method of Operation/ Authority for Movement	Supplemental Codes	Supplemental Codes	Supplemental Codes
2 - Non Signaled	2 - Direct Train Control	F - Direct Traffic Control H - Manual Block System J - Positive Train Control L - Special Instructions N - Time Table/Train Orders P - Track Warrant Control Z - Other – Narrative Required	E - Broken Rail Monitoring F - Direct Traffic Control H - Manual Block System J - Positive Train Control L - Special Instructions M - Switch Point Monitoring N - Time Table/Train Orders P - Track Warrant Control Z - Other – Narrative Required	E - Broken Rail Monitoring F - Direct Traffic Control H - Manual Block System J - Positive Train Control L - Special Instructions M - Switch Point Monitoring N - Time Table/Train Orders P - Track Warrant Control Z - Other – Narrative Required
2 - Non Signaled	3 - Yard/Restricted Limits	J - Positive Train Control L - Special Instructions Z - Other – Narrative Required	E - Broken Rail Monitoring J - Positive Train Control L - Special Instructions M - Switch Point Monitoring	E - Broken Rail Monitoring J - Positive Train Control L - Special Instructions M - Switch Point Monitoring
2 - Non Signaled	4 - Block Register Territory	J - Positive Train Control Z - Other – Narrative Required	E - Broken Rail Monitoring M - Switch Point Monitoring Z - Other – Narrative Required	E - Broken Rail Monitoring M - Switch Point Monitoring Z - Other – Narrative Required

**FRA Guide for Preparing Accident/Incident Reports**

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**Type of Territory for Other than Main Track or Siding Track to Include Yard Track and Industry Track**

<b>Position 1</b>	<b>Position 2</b>	<b>Position 3</b>	<b>Position 4</b>	<b>Position 5</b>
<b>Signalization</b>	<b>Method of Operation/ Authority for Movement</b>	<b>Supplemental Codes</b>	<b>Supplemental Codes</b>	<b>Supplemental Codes</b>
1 - Signaled	5 - Other Than Main Track (Standard Rule 105 or Equivalent)	F - Interlocking K - Special Instructions Z - Other – Narrative Required	F - Interlocking K - Special Instructions Z - Other – Narrative Required	F - Interlocking K - Special Instructions Z - Other – Narrative Required
2 - Not Signaled	5 - Other Than Main Track (Standard Rule 105 or Equivalent)	J - Restricted Speed or Equivalent K - Special Instructions Z - Other – Narrative Required	K - Special Instructions Z - Other – Narrative Required	K - Special Instructions Z - Other – Narrative Required

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**Type of Territory for Siding Track**

<b>Position 1</b>	<b>Position 2</b>	<b>Position 3</b>	<b>Position 4</b>	<b>Position 5</b>
<b>Signalization</b>	<b>Method of Operation/ Authority for Movement</b>	<b>Supplemental Codes</b>	<b>Supplemental Codes</b>	<b>Supplemental Codes</b>
1 - Signaled	1 - Signal Indication	a - Auto Cab Signals b - Auto Train Control c - Auto Train Stop h - Interlocking j - Other – Narrative Required l - Other Than Main Track m - Positive Train Control o - Special Instructions s - Traffic Control System/CTC	a - Auto Cab Signals b - Auto Train Control c - Auto Train Stop h - Interlocking j - Other – Narrative Required l - Other Than Main Track m - Positive Train Control o - Special Instructions s - Traffic Control System/CTC	a - Auto Cab Signals b - Auto Train Control c - Auto Train Stop h - Interlocking j - Other – Narrative Required l - Other Than Main Track m - Positive Train Control o - Special Instructions s - Traffic Control System/CTC
2 - Non Signaled	5 - Other Than Main Track	e - Broken Rail Monitoring j - Other – Narrative Required m - Positive Train Control o - Special Instructions p - Switch Point Monitoring	e - Broken Rail Monitoring j - Other – Narrative Required m - Positive Train Control o - Special Instructions p - Switch Point Monitoring	e - Broken Rail Monitoring j - Other – Narrative Required m - Positive Train Control o - Special Instructions p - Switch Point Monitoring
	No other codes allowed			

### **APPENDIX K** **Electronic Submission of Reports to FRA**

The instructions in the Guide are limited to issues associated with recordkeeping and reporting. Railroads may transmit their monthly reports to FRA by alternative means, e.g., on optical media or as an electronic data file, that can be submitted as an e-mail attachment. The technical information needed for doing this is not described in the Guide, since it is not necessary for reporting decisions. A separate manual is available, upon request, that contains the specifications for doing this, and is titled “Guidelines for Submitting Accident/Incident Reports by Alternative Methods.”

To assist railroads in maintaining and submitting records and reports required by this rule, FRA developed the software package Accident/Incident Report Generator (AIRG) for personal computers that have Windows-based operating systems. See 61 Fed. Reg. 59485 (Nov. 22, 1996). FRA will provide you with a copy of this software free of charge, upon request by the reporting officer. You can find information on how to obtain AIRG by referring to <http://safetydata.fra.dot.gov/OfficeofSafety>, and clicking on “Changes in Railroad Accident/Incident Recordkeeping and Reporting Info.”

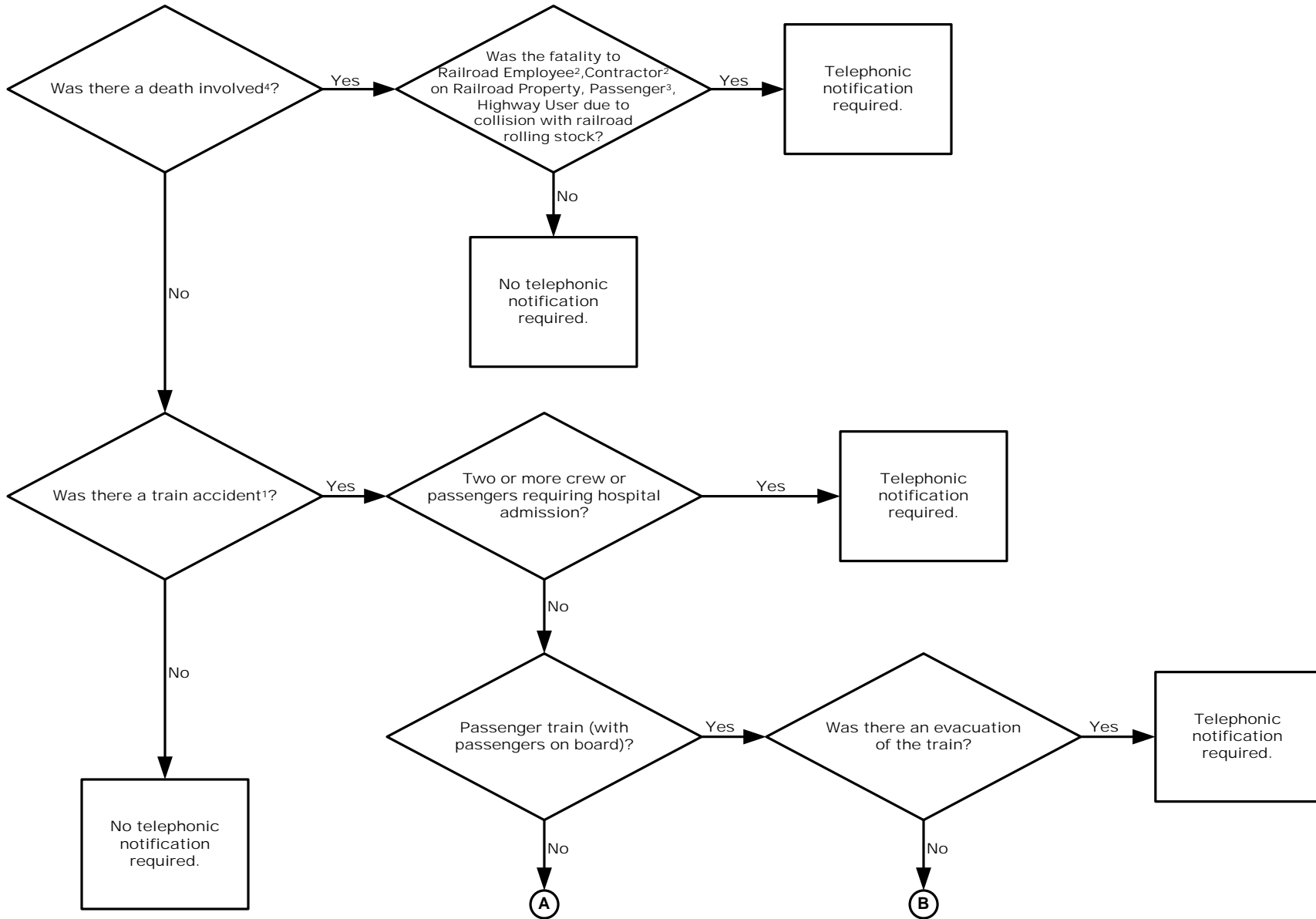
Railroads that are submitting reports electronically or on optical media for the first time must also provide printed copies of these reports. FRA will review the submissions, and when the electronic (or optical) submissions are in total agreement with the hard copies for 3 consecutive reporting months, FRA will notify the railroad, in writing, that submission of the hard-copy reports, except for the signed Railroad Injury and Illness Summary (Form FRA F 6180.55), is no longer required. In order to minimize the time necessary to develop software to accomplish this, FRA will not require that the computer-generated hard copy be an exact facsimile of the standardized form. In lieu of this, an alternate form designed by the railroad will be accepted, provided that the data is organized in a format that parallels the order of the items on the standard form. In addition, each data element must have a descriptive identifier attached to it that clearly distinguishes the data item. Railroads submitting electronically can either submit a printed copy of the signed Form FRA F 6180.55, or alternatively send in a scanned copy of the signed form in .pdf or .jpg format. The railroad must maintain the original completed FRA Form F 6180.55 and the electronic notification of receipt of the form (see §225.27(c) for details).

**APPENDIX L**  
**Proposed Rule: 49 CFR 225**

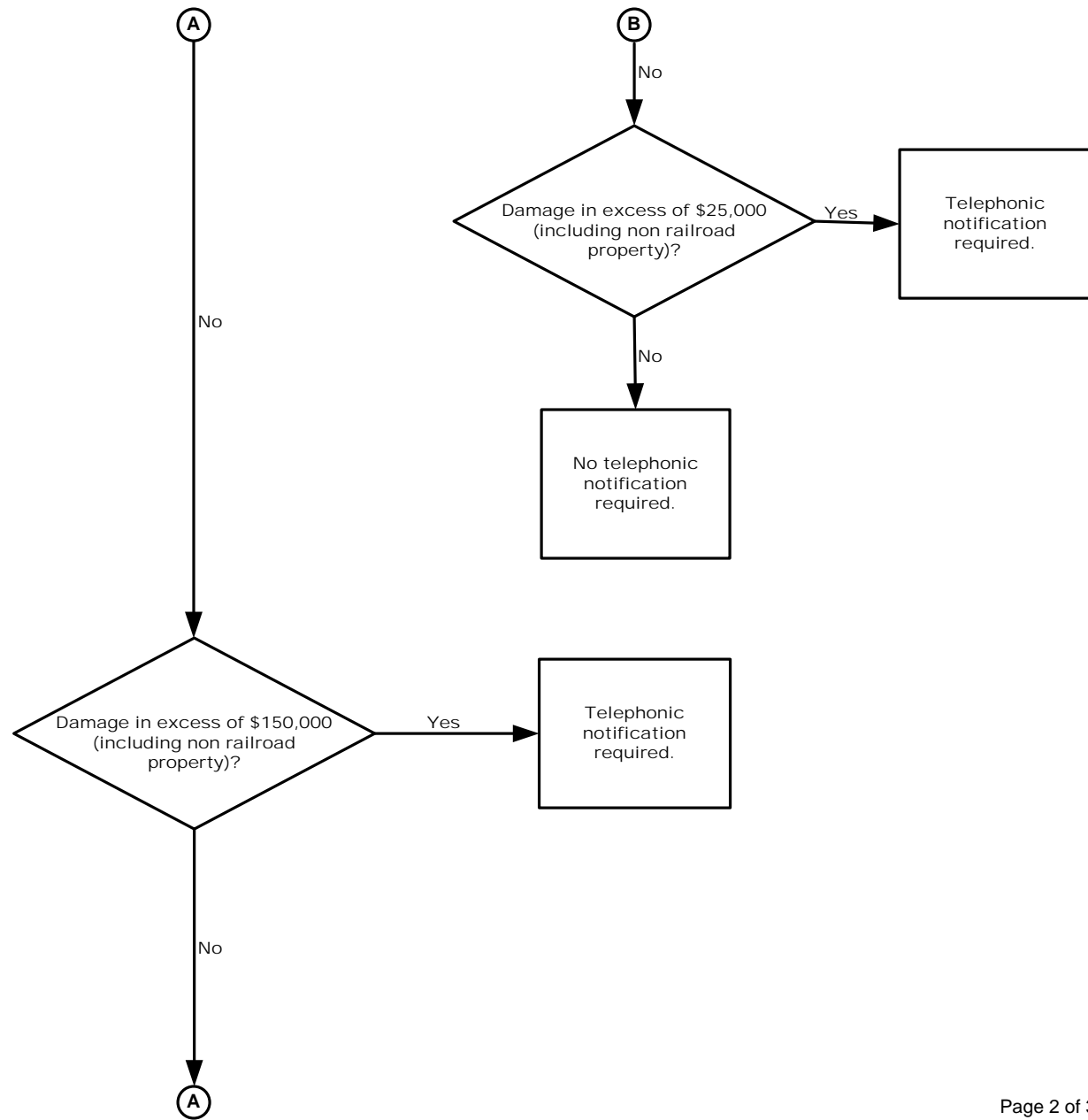


**APPENDIX M**  
**Telephonic Notification Chart**

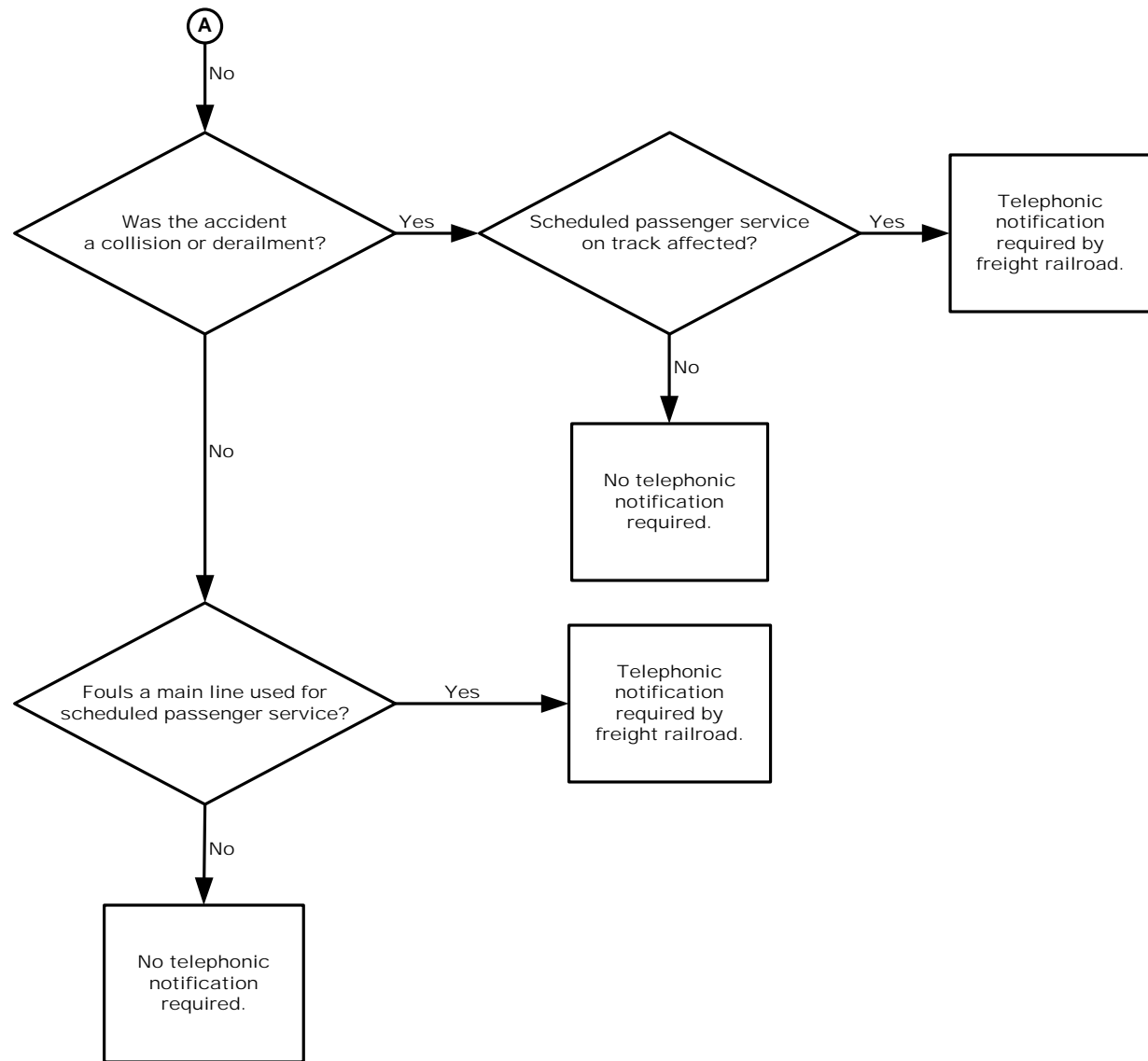
# Is Telephone Notification Required?



Is Telephone Notification Required?  
(Continued from Previous Page)



Is Telephone Notification Required?  
(Continued from Previous Page)



<sup>1</sup> Using the FRA Criteria for determination of an accident.

<sup>2</sup> Even due to natural causes not related to rail operations, later the railroad may deem the fatality is not reportable to the FRA.

<sup>3</sup> See FRA Definition.

<sup>4</sup> Within 24 hours of the event, see instructions.

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