



# ILLINOIS OSHA INJURY REPORTING REQUIREMENTS

If the answer to any of these questions is **YES**, please follow the reporting requirements below.

Was the injury fatal?

Was the worker admitted to a hospital?

Was there an amputation?

Did someone lose an eye?

**Immediately call the Division of Safety & Compliance at *217-255-2106* and provide:**

- Building name and address where the incident took place
- Date and time of the incident
- Date and time of notification to supervisor/department official
- Name(s) of employee(s) deceased or injured
- Number of fatalities or employees admitted to a hospital
- Name and contact number of the person making the report
- Brief description of the incident

**For general questions, contact:**

Occupational Safety & Health: [oshs@illinois.edu](mailto:oshs@illinois.edu)

*Scan me!*

