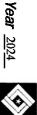
OSHA's Form 300A

Summary of Work-Related Injuries and Illnesses



U.S.Departmenti Labor Occupation & sistemand Health Administration

FormapprovedOMBno. 1218-0176

All astablishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or litnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate belove completing this summary.

Using the Log. count the individual entries you made for each category. Then write the totals below making sure you've added the entries from every page of the Log. If you

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

Number of Cases	ses		
Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
0	0	4	4
(G)	Ĩ	9	(L)
Number of Days	ys		
Total number of days away from work		Total number of days of job transfer or restriction	
0	ı	264	
B		C	
Injury and Illness Types	ėss Types		
Total number of (M) (1) Injuries	ω	(3) Respiratory conditions	itions 0
	•	(4) Poisonings	0
(2) Skin disorders		(5) Hearing loss	0
		(6) All other illnesses	0

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

Public reporting burden for this collection of information is estimated to average 50 minutes per response, including time to review the instructions, search and guther the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other appeared of this chara collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 ConstitutionAvenne, NW, Washington, DC 20210. Do not send the completed forms to this office

Establishment information Carson Nursing & Rehab Ctr Carson City Carson City State NV ZIP 89701 Industry description (e.g., Manufacture of motor truck trailers) Health Care North American Industrial Classification (NAICS), if known (e.g., 336212) North American Industrial Classification (NAICS), if known (e.g., 336212) North American Industrial Classification (NAICS), if known (e.g., 336212) North American Industrial Classification (NAICS), if known (e.g., 336212) North American Industrial Classification (NAICS), if known (e.g., 336212) North American Industrial Classification (NAICS), if known (e.g., 336212) Annual average number of employees Worksheet on the back of this page to estimate.) 4 Annual average number of employees last year 109371 Total hours worked by all employees last year 109371 Sign here Sign here Knowledge the entries are true, accurrate, and complete. Company Plant I have examined this document and that to the best of my knowledge the entries are true, accurrate, and complete. Multiplication of the page of the pag
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