

LOGGING DATA COLLECTION INSTRUMENT

Case ID: ____MI_____ Date of Investigation ___/___/

Respondent ____

Ge	General Logging Information					
1.	Type of logging	01. Sawtimber	03. Both			
		02. Pulpwood	9. Unknown			
2.	Type of forest composition	01. Hardwood	03. Mixed			
		02. Conifer	9. Unknown			
3.	Type of Timber stand layout	01. Naturally occurring	9. Unknown			
		02. Plantation				
4.	Was timber stand marked?	01. Yes	9. Unknown			
		02. No				
5.	Type of Harvesting conducted at worksite	01. Clearcut	04. Other (specify)			
		02. Selective/Partial cut				
		03. Salvage logging	9. Unknown			
6.	Type of operator	01. Commercial	03. Other (Specify)			
		02. Self-employed				
			9. Unknown			
7.	Land ownership at incident site	01. Federal	05. Private			
		02. American Indian	06. Other (specify)			
		03. State	9. Unknown			
		04. Industrial	9. UIKIIOWII			
	ctim Information	I				
8.	Was the victim performing a task that was not a	01. Yes	9. Unknown			
	part of their normal work duties/tasks?	02. No				
9.	Was anyone within direct visual or verbal	01. Yes	9. Unknown (Go to Q11)			
	contact with victim at the time of the incident?	02. No (Go to Q11)				
10.	Was this direct contact maintained for safety	01. Yes	9. Unknown			
	purposes?	02. No				
11.	How familiar was the victim with the task	01. Not familiar	03. Very familiar			
	being performed at the time of the incident?	02. Somewhat familiar	9. Unknown			
12.	How often did victim do this task? (if variable	01. First time ever?	05. One or more times per			
	amounts, ask about the month prior to the incident)	02. Less than once per	week			
		week	06. Daily or almost daily			
		03. About once per	9. Unknown			
		month				
		04. Sporadically				
10	YY 1 1 1 1 1 1 1 1 1 1 1 1 1	(during a month)				
13.	How long had it been since the task was last	01. < 1 week before	04. 6 months to 1 year			
	performed by the victim?	incident	before incident			
		02. < 1 week before	05. 1 year before incident			
		incident	9. Unknown			
		03. 1 month before				
		incident				

4. How long had victim been working on day of	01. Less than 1 hour	04. 9-10 hours
incident?	02. 1-4 hours	05. More than 10 hours
	03. 5-8 hours	9. Unknown
ncident Information	01 11 1 1	05 Has (1 and 1 and
5. The victim's work area at the time of the	01. Usual work area	05. Unauthorized work
incident was: (Circle all that apply)	02. Unfamiliar work area	area 06. Authorized work area
	03. Limited Access	9. Unknown
	work area	J. Chkildwi
	04. Restricted work	
	area	
6. Ground conditions at incident site (Circle	01. Clear	06. Mud
primary and secondary conditions)	02. Moderate to Heavy	07. Ice covered
	Brush	08. Snow covered
	03. Moderate to heavy	09. Other (specify)
	slash	99. Unknown
	04. Rocky ground	99. UIIKIIOWII
7 XV	05. Swamp/bog	02 NA (C. (010)
7. Were there adverse weather conditions at the time of the incident?	01. Yes (C_{0}, t_{0}, O_{1})	03. NA (Go to Q19)
time of the incident? 8. Adverse weather conditions which affected	02. No (Go to Q19) 01. Visibility	9. Unknown (Go to Q19
incident (List primary and secondary	01. Visibility 02. Electrical Storms	06. Fog 07. Darkness
conditions)	03. High winds	07. Darkness 08. Other (specify)
conditions)	04. Rain	ob. Other (specify)
	05. Snow	9. Unknown
9. Location where incident occurred	01. Cutting site	06. City/State/Federal roa
	02. Yard	07. Other (Specify)
	03. Landing	
	04. Skid trail	9. Unknown
	05. Employer-built road	
0. Estimate Angle or percent grade of land where	01. d	
incident occurred	9. Unknown	
1. Type of work or work phase being performed	01. Felling	08. Scaling/sorting
by victim	02. Bucking	09. Loading
	03. Limbing	10. Hauling
	04. Brushing 05. Chasing/Choker	11. Transporting
	setting	12. Other (specify)
	06. Bunching/rigging	99. Unknown
	07. Skidding	
2. Was first aid training provided to foreman,	01. Yes	9. Unknown
supervisors and persons in charge of crews	02. No	
3. Were there first aid kits available at worksite?	01. Yes	9. Unknown
	02. No	
4. Were there first aid kits available in the	01. Yes	9. Unknown
transport vehicle?	02. No	
5. Was logging operation on schedule?	01. Yes	9. Unknown
	02. No	
6. Type of payment for work	01. By the cord, load or o	other piecework
	02. By the hour or week	
	03. Other (Specify)	
	9. Unknown	

27	Cause of incident?	01	Falling tree limb etc	(Ge	(0.10, 0.28)	
27. Cause of incident?		01. Falling tree, limb, etc. (Go to Q28)02. Logs, downed tree, etc. (Go to Q52)				
		02. Logs, downed free, etc. (Go to $Q52$) 03. Chain saw (Go to $Q59$)				
		04. Transportation related (Go to Q63)05. Fall related (Complete Fall Collection Data Instrument)06. Machinery related (Complete Machine-related Data				
		00.	Collection Instrument)	mpiet	e Machine-related Data	
		07. Electrocution (Complete Electrocution Data Collection Instrument)			ctrocution Data Collection	
		08	Other (specify)			
		9.	Unknown			
Fal	lling Trees Limb Insident	9.	UIKIIOWII			
	lling Tree, Limb Incident	01				
28.	Was victim a feller or bystander?		Feller (Continue)))		
20			Bystander (Go to Q49		0 1' 1	
29.	Type of undercut		None		Swedish	
			Standard	9.	Unknown	
		-	Humbolt			
30.	Was the back cut made properly?		Yes	9.	Unknown	
			No			
31.	Species of felled tree (Be specific eg yellow	01.				
	poplar, dutch elm, noble fir, etc)	9.	Unknown			
32.	Diameter of stump of felled tree (inches)	01.	inches			
	-	9.	Unknown			
33.	Height of felled tree (feet)	01.	feet			
		9.	Unknown			
34.	Was escape path prepared?	01.	Yes	9.	Unknown	
0	a as escape pain prepareor		No		e mino () n	
35	Did felled tree lodge/hang up into other tree?		Yes	9.	Unknown (Go to Q40)	
55.	Did felied tree lodge/hang up into other tree?		No (Go to Q40)	9.		
26	Was vistim attempting to autricate ladged/hung		Yes	0	Unknown	
50.	Was victim attempting to extricate lodged/hung			9.	UIIKIIOWII	
27	up tree by felling standing tree?	_	No			
37.	Distance from stump of felled tree to standing	01.	Feet			
20	tree (feet)		Unknown		** 1	
38.	Was victim struck by dislodged tree?		Yes (Go to Q69)	9.	Unknown	
			No			
39.	Was victim struck by tree that was being		Yes (Go to Q69)	9.	Unknown	
	felled?		No			
40.	Was victim struck by tree top, branch or snag?	01.	No (Go to Q45)	04.	Snag	
		02.	Tree top	9.	Unknown (Go to Q45)	
		03.	Branch			
41.	What was length (ft) and diameter (in) of tree	01.	feet	9.	Unknown	
	top, snag or branch that struck victim?		inches			
42.	Was tree top, branch or snag that struck victim		Tree being felled (Go	to (045)	
	from tree that was being felled or from another		Other tree			
	tree?	9.	Unknown (Go to Q45	5)		
/13	If tree top, branch or snag was from another		feet	·)		
45.	tree, what was the distance (ft) from stump of	9.	Unknown			
		9.	UIKIIOWII			
	felled tree to base of tree from which tree top,					
4.4	branch or snag fell What was diameter at here height (inches) of	01	• 1			
44.	What was diameter at base height (inches) of	01.				
1-	tree from which tree top, branch or snag fell?	9.	Unknown	6	** 1	
45.	Did incident involve butt rebound?		Yes	9.	Unknown	
			No			
46.	Was decay present in the butt?		Yes	9.	Unknown	
		02.	No			

47. Was the incident due to tree kicking/twisting off the hinge?	01. Yes (Go to Q69) 02. No	9. Unknown (Go to Q69)		
48. Was the incident due to "barber chairing"?	01. Yes (Go to Q69)	9. Unknown (Go to Q69)		
· · · · · · · · · · · · · · · · · · ·	02. No (Go to Q69)			
49. Activity of the bystander	01. Spotter/shoveler	05. Supervisor		
	02. Limber/bucker	06. Other (Specify)		
	03. Other feller			
	04. Equipment operator	9. Unknown		
50. Was a warning system used to let workers	01. Yes	9. Unknown (Go to Q69)		
know felling operation was occurring?	02. No (Go to Q69)			
51. What type of warning system was used?	01. Hand signals (Go to C	2 69)		
	02. Vocal signals (Go to	Q69)		
	03. Radio (Go to Q69)			
	04. Cellular communication (Go to Q69)			
	05. Other (specify)	(Go to Q69)		
	9. Unknown (Go to Q69	2)		
Log/Downed Tree Incident				
52. Type of activity	01. Bucking, limbing	03. Loading, sorting		
-	02. Skidding, Cabling			
53. Type of bucking/limbing incident	01. Sprung sapling/limb	03. Other (specify)		
	whip			
	02. Log roll/sprung log	9. Unknown		
54. Type of skidding/cabling incident	01. Struck by moving log	S		
vi 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	02. Caught under moving logs			
	03. Struck by falling logs	C		
	04. Other (specify)			
	9. Unknown			
55. Type of equipment involved	01. Cable logger	03. Other (specify)		
	02. Skidder/yarder			
		9. Unknown		
56. Type of loading/sorting incident		n logs, victim of shifting pile		
		n logs, victim near shifting		
	pile			
	03. Caught under/between logs being sorted			
	04. Struck by log during loading			
	05. Other (specify)			
	9. Unknown	0 11 1 (0 . 0 . 0		
57. Victim struck by logs falling from truck?	01. Yes	9. Unknown (Go to Q69)		
50 Malada (02. No (Go to Q69)	05 D'. 1 / 11		
58. Method of securing logs on truck bed (list up to 2 methods of securing) (After Completion, Go to Q69)	01. None	05. Binders/cables		
memous of securing) (After Completion, Go to Q69)	02. Stakes	06. Other (specify)		
	03. Binders/chains	9. Unknown		
	04. Binders/ropes	2. UIIKIIUWII		
Chain Saw Incident				
59. Incident involved	01. Kickback	05. Kickback while using		
	02. Broken chain	saw one-handed		
	03. off-hand cut	06. Other (specify)		
	04. Operating saw one-			
	handed	9. Unknown		
60. Type of chain saw	01. One man	9. Unknown		
	02. Two man			
		x 1		
61. Bar length	01 9. Unknown	Inches		

62.	Was chain saw equipped with a chain brake?	01. Yes (Go to Q69)		
	1 11	02. No (Go to Q69)		
		9. Unknown (Go to Q6	9)	
	nsportation Incident (Transportation incide	ent = people, logs, chips trai	nspor	ted on recognized
	way "off the landing"			
63. I	Did vehicle have current legal inspection?	01. Yes 02. No	9.	Unknown
64. l	Did vehicle: (Enter up to 3 choices in chronological	01. Overturn	05.	Tire Blowout
(order)	02. Brake failure		Load shift
		03. Hit by other vehicle	07.	Other (specify)
		04. Hit other vehicle		
		0.1	9.	Unknown
65.	Was driver wearing a safety belt?	01. Yes	9.	Unknown
		02. No	0	TT 1
66.	Were passengers wearing a safety belt?	01. Yes	9.	Unknown
<i>(</i> –)	***	02. No	0.4	—
67.	Was vehicle	01. Hauling logs		Transporting personnel
		02. Hauling chips	05.	Other (specify)
		03. Hauling equipment	9.	Unknown
69 1	Was the victim certified or licensed to operate	01. Yes (Go to Q69)	9. 9.	Unknown (Go to Q69)
	Was the victim certified or licensed to operate vehicle involved in the incident?	01. Tes (Go to Q69) 02. No (Go to Q69)	9.	Unknown (Go to Q69)
		02. 110 (00 to Q03)		
	npany Safety Program	01 1	0.0	274
	Were safety issues discussed with victim prior	01. Yes		NA
	to starting the day's work?	02. No	9.	Unknown
	Were safety issues discussed during the	01. Yes		NA
	planning and design phases of the project?	02. No	9.	Unknown
	sonal Protective Equipment	I		
	What types of PPE does the company require	01. None		
	employees to use while performing the task: (Circle all that apply)	02. Hard Hat		
(03. Safety boots		
		04. Gloves		
		05. Chaps or Saw Pants		
		06. Eye protection		
		07. Face protection		
		08. Hearing Protection		
		09. Other (specify)		
70		99. Unknown		U.1 (0 (070)
72.	Was victim using PPE?	01. Yes $(C_{1} + C_{2})$	9.	Unknown (Go to Q78)
72 1		02. No (Go to Q78)		
	What types of PPE was victim using: (Circle all that apply)	01. Hard Hat		
ı	litat appry)	02. Safety boots		
		03. Gloves		
		04. Chaps or Saw pants		
		05. Eye protection		
		06. Face protection		
		07. Hearing Protection 08. Other (specify)		
		9. Unknown		
7/ 1	Was DDE used in accordance with its design	01. Yes	9.	Unknown
	Was PPE used in accordance with its design and function?	01. Yes 02. No	9.	UIIKIIOWII
:		02. No 01. Yes	9.	Unknown
	Was the type of DDE used sufficient to proto the		1 4	UIIKIIOWII
75.	Was the type of PPE used sufficient to protect			
75. Y	Was the type of PPE used sufficient to protect him/her? Did PPE malfunction?	01. Yes	9.	Unknown (Go to 78)
75. Y	him/her?	02. No		

77. If yes, briefly describe PPE malfunction:			
78. Did employer maintain and inspect PPE on a	01. Yes	03. NA (END)	
regular basis?	02. No (END)	9. Unknown (END)	
79. Date of last PPE inspection:	01// Hard Hat		
	02// Safety boots		
	03// Gloves		
	04// Chaps or Saw pants		
	05// Eye protection 06// Face protection		
	07/ Hearing Protection		
	08// Other (specify)		

NOTES' SKETCHES' PICTURES

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