

| NATURE OF INJURY | PART OF BODY | CAUSE OF INJURY |
|---------------------------------------------------------------|--------------------------------------------|-------------------------------------------------------------------------|
| 01. No Physical Injury | 10. Multiple Head Injury | 01. Chemicals |
| 02. Amputation | 11. Skull | 02. Hot Objects or Substances |
| 03. Angina Pectoris | 12. Brain | 03. Temperature Extremes |
| 04. Burn | 13. Ear(s) | 04. Fire or Flame |
| 07. Concussion | 14. Eye(s) | 05. Steam or Hot Fluids |
| 10. Contusion | 15. Nose | 06. Dust, Gases, Fumes or Vapors |
| 13. Crushing | 16. Teeth | 07. Welding Operation |
| 16. Dislocation | 17. Mouth | 08. Radiation |
| 19. Electric Shock | 18. Soft Tissue | 09. Contact With, NOC. |
| 22. Enucleation | 19. Facial Bones | 10. Machine or Machinery |
| 25. Foreign Body | 20. Multiple Neck Injury | 11. Cold Objects or Substances |
| 28. Fracture | 21. Vertebrae | 12. Object Handled |
| 30. Freezing | 22. Disc | 13. Caught In, Under or Between, NOC. |
| 31. Hearing Loss or Impairment | 23. Spinal Cord | 14. Abnormal Air Pressure |
| 32. Heat Prostration | 24. Larynx | 15. Broken Glass |
| 34. Hernia | 25. Soft Tissue | 16. Hand Tool, Utensil; Not Powered |
| 36. Infection | 26. Trachea | 17. Object Being Lifted or Handled |
| 37. Inflammation | 30. Multiple Upper Extremities | 18. Powered Hand Tool, Appliance |
| 40. Laceration | 31. Upper Arm | 19. Caught, Puncture, Scrape, NOC. |
| 41. Myocardial Infarction | 32. Elbow | 20. Collapsing Materials (Slides of Earth) Either Man Made or Natural |
| 42. Poisoning - General | 33. Lower Arm | 25. From Different Level (Elevation) Off Wall, Catwalk, Bridge, Etc. |
| 43. Puncture | 34. Wrist | 26. From Ladder or Scaffolding |
| 46. Rupture | 35. Hand | 27. From Liquid or Grease Spills |
| 47. Severance | 36. Finger(s) | 28. Into Openings Shafts, Excavations, Floor Openings, Etc. |
| 49. Sprain or Tear | 38. Shoulder(s) | 29. On Same Level |
| 52. Strain or Tear | 39. Wrist (s) & Hand(s) | 30. Slipped, Do Not Fall |
| 53. Syncope | 40. Multiple Trunk | 31. Fall, Slip or Trip, NOC. |
| 54. Asphyxiation | 41. Upper Back Area | 32. On Ice or Snow |
| 55. Vascular | 42. Lower Back Area | 33. On Stairs |
| 58. Vision Loss | 43. Disc | 40. Crash of Water Vehicle |
| 59. All Other Specific Injuries, NOC | 44. Chest | 41. Crash of Rail Vehicle |
| 60. Dust Disease, NOC | 45. Sacrum and Coccyx | 45. Collision or Sideswipe With Another Vehicle |
| 61. Asbestosis | 46. Pelvis | 46. Collision with a Fixed Object Standing Vehicle or Stationary Object |
| 62. Black Lung | 47. Spinal Cord | 47. Crash of Airplane |
| 63. Byssinosis | 48. Internal Organs | 48. Vehicle Upset Overturned or Jackknifed |
| 64. Silicosis | 49. Heart | 50. Motor Vehicle, NOC. |
| 65. Respiratory Disorders | 50. Multiple Lower Extremities | 52. Continual Noise |
| 66. Poisoning - Chemical, (Other Than Metals) | 51. Hip | 53. Twisting |
| 67. Poisoning - Metal | 52. Upper Leg | 54. Jumping |
| 68. Dermatitis | 53. Knee | 55. Holding or Carrying |
| 69. Mental Disorder | 54. Lower Leg | 56. Lifting |
| 70. Radiation | 55. Ankle | 57. Pushing or Pulling |
| 71. All Other Occupational Disease Injury, NOC | 56. Foot | 58. Reaching |
| 72. Loss of Hearing | 57. Toes | 59. Using Tool or Machinery |
| 73. Contagious Disease | 58. Big Toes | 60. Strain or Injury By, NOC. |
| 74. Cancer | 60. Lungs | 61. Welding or Throwing |
| 75. AIDS | 61. Abdomen Including Groin | 65. Moving Part of Machine |
| 76. VDT - Related Diseases | 62. Buttocks | 66. Object Being Lifted or Handled |
| 77. Mental Stress | 63. Lumbar & or Sacral Vertebrae | 67. Sanding, Scraping, Cleaning Operation |
| 78. Carpal Tunnel Syndrome | 64. Artificial Appliance | 68. Stationary Object |
| 79. Hepatitis C | 65. Insufficient Info to Properly Identify | 69. Stepping on Sharp Object |
| 80. All Other Cumulative Injury, NOC | 66. No Physical Injury | 70. Striking Against or Stepping On, NOC. |
| 90. Multiple Physical Injuries Only | 90. Multiple Body Parts | 74. Fellow Worker; Patient |
| 91. Multiple Injuries Including Both Physical & Psychological | 91. Body Systems and Multiple Body | 75. Falling or Flying Object |
| | 99. Whole Body | 76. Hand Tool or Machine in Use |
| | | 77. Motor Vehicle |
| | | 78. Moving Parts of Machine |
| | | 79. Object Being Lifted or Handled |
| | | 80. Object Handled By Others |
| | | 81. Struck or Injured, NOC. |
| | | 82. Absorption, Ingestion or Inhalation, NOC |
| | | 84. Electrical Current |
| | | 85. Animal or Insect |
| | | 86. Explosion or Flare Back |
| | | 87. Foreign Matter (Body) in Eye(s) |
| | | 88. Natural Disasters |
| | | 89. Person in Act of a Crime |
| | | 90. Other Than Physical Cause of Injury |
| | | 91. Mold |
| | | 94. Repetitive Motion Callous, Blister, Etc. |
| | | 95. Rubbed or Abraded, NOC. |
| | | 96. Terrorism |
| | | 97. Repetitive Motion Carpel Tunnel Syndrome |
| | | 98. Cumulative, NOC |
| | | 99. Other - Miscellaneous, NOC |

INSTRUCTIONS FOR FILING WC FIRST REPORT OF INJURY

Employers should send a completed legible form to the insurance carrier or, if self-insured, to the designated office handling their workers' compensation claims. The insurance carrier or designated office should forward this First Report on to the Workers' Compensation Division, Department of Labor, Montgomery, Alabama 36131 within fifteen (15) days from the date of injury or date of notification to the employer for all injuries for which compensation is claimed or paid. This includes deaths, permanent disabilities or temporary disabilities exceeding three (3) days).

Block 1. A number assigned by the insured to identify a specific claim

Block 2. An identifier for a specific claim within a claim administrator's claims processing system.

Block 3. Case number from log maintained for OSHA

Block 4 - Block 14. Self Explanatory

Block 15. Employer Federal ID number

Block 16. Employer Unemployment Compensation Account Number

Block 17. NAICS Industry Codes http://dir.alabama.gov/docs/forms/wc_naics.pdf

Block 18. Carrier's name

Block 19. Carrier's FEIN

Block 20. A code representing the kind of entity providing financial responsibility for the claim, exp: () Insurance Carrier (S) Self Insurer (G) Guarantee Fund/Group

Block 21 through Block 63. Self Explanatory

Block 64. Nature of Injury Codes http://dir.alabama.gov/docs/forms/wcio_nature_table.pdf

Block 65. Part of Body Codes http://dir.alabama.gov/docs/forms/wcio_part_table.pdf

Block 66. Cause of Injury Codes http://dir.alabama.gov/docs/forms/wcio_cause_table.pdf

Block 67 through Block 81. Self Explanatory