

Office Ergonomics Self-Assessment Worksheet

A properly configured workstation can assist in reducing the risk of discomfort, pain, musculoskeletal and/or a repetitive strain injury. The following self-assessment questionnaire and checklist is designed to assist you in setting up your own workstation by implementing some simple ergonomic principals.

In order to process your request for an Ergonomic Evaluation, you will need to complete the Self-Assessment Worksheet. The purpose of this worksheet is to help you get a better understanding of your current ergonomic needs and simple changes you can implement now at your current desk set-up. Carefully read and fill out this worksheet to the best of your knowledge. Upon completion, please return this completed document to the person who provided you this form.

Ergonomics 101: One of the primary components of ergonomics is fitting a job and desk to a person by way of establishing a neutral body position.

To set up a workstation for optimal comfort and performance, it's helpful to understand the concept of neutral body posture. Neutral body posture is a comfortable working position in which your joints are naturally aligned.

Working with the body in a neutral position reduces stress and strain on the muscles, tendons, nerves and joints – which can reduce your risk of developing a musculoskeletal disorder (MSD).

The following five basic factors to your work stations need to be considered and adjusted, if needed. By completing this self-assessment, you will be able to self-modify most, if not all, of your ergonomic concerns. Thus you will be able to identify/establish a neutral body position and ergonomically correct your workstation.

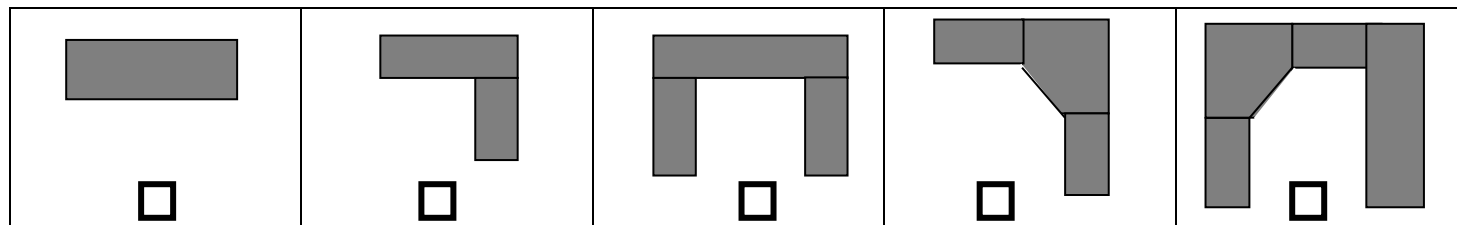
Follow instructions in each box and place a ✓(check) in blank box as you deem appropriate.

1. EMPLOYEE'S INFORMATION

(a.) FULL NAME:		(b.) DATE:
(c.) DEPARTMENT:	POSITION:	
(d.) WORK PHONE:	(f.) EMAIL:	
(g.) HOW MANY HOURS DO YOU SPEND AT YOUR COMPUTER: <input type="checkbox"/> 1 to 2 hours <input type="checkbox"/> 3 to 4 hours <input type="checkbox"/> 5 to 6 hours <input type="checkbox"/> 7 to 8+ hours		
HEIGHT :	APPROX. WEIGHT:	WHICH IS YOUR DOMINATE HAND/EXTREMITY: <input type="checkbox"/> RIGHT <input type="checkbox"/> LEFT <input type="checkbox"/> BOTH/ AMBIDEXTROUS
WHAT TYPE OF COMPUTER WORK DO YOU DO?		
<input type="checkbox"/> EMAILS AND CORRESPONDENCE <input type="checkbox"/> SPREADSHEETS <input type="checkbox"/> GRAPHICS <input type="checkbox"/> WORD PROCESSING <input type="checkbox"/> INTERNET RESEARCH / BROWSING <input type="checkbox"/> PROGRAMMING <input type="checkbox"/> CAD DRAFTING <input type="checkbox"/> DATA ENTRY <input type="checkbox"/> NO COMPUTER WORK <input type="checkbox"/> OTHER: _____		

WHAT ARE YOUR AREAS OF DISCOMFORT?

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> NECK | <input type="checkbox"/> LOWER BACK | <input type="checkbox"/> MID BACK | <input type="checkbox"/> UPPER BACK |
| <input type="checkbox"/> RIGHT HANDS / FINGERS | <input type="checkbox"/> LEFT HAND / FINGERS | <input type="checkbox"/> LEFT SHOULDER | <input type="checkbox"/> LEFT KNEE |
| <input type="checkbox"/> LEFT HAND FINGERS | <input type="checkbox"/> RIGHT HAND / FINGERS | <input type="checkbox"/> RIGHT SHOULDER | <input type="checkbox"/> RIGHT KNEE |
| <input type="checkbox"/> LEFT WRIST | <input type="checkbox"/> LEFT ELBOW | <input type="checkbox"/> LEFT THIGH / HIP | <input type="checkbox"/> LEFT FOOT / ANKLE |
| <input type="checkbox"/> RIGHT WRIST | <input type="checkbox"/> RIGHT ELBOW | <input type="checkbox"/> RIGHT THIGH / HIP | <input type="checkbox"/> RIGHT FOOT / ANKLE |
| <input type="checkbox"/> HEAD | <input type="checkbox"/> RIGHT EYE | <input type="checkbox"/> LEFT EYE | <input type="checkbox"/> OTHER" : _____ |



CURRENT DESK TYPE: FREE STANDING MODULAR COUNTER TOP DESK MULTI-USERS

WHAT IS HEIGHT OF DESK FROM THE FLOOR TO TOP OF YOUR DESK: _____ **DOES DESK HAVE A KEYBOARD TRAY?** NO YES

Follow instructions in each box and place a ✓(check) in blank box as you deem appropriate.

➤ **WORK STATION / WORK SURFACE:**

The proper set up of your work surface and area is essential in establishing an ergonomically correct workstation. Frequently used items i.e. your phone should be positioned within a natural and neutral reach. You should avoid hyper extensions in performing simple tasks at your desk. For each of the recommendations below, please note with a ✓ (check mark) that you have performed or attempted the recommended adjustment. **IF YOU NEED ASSISTANCE OR ARE UNABLE TO PERFORM AN ADJUSTMENT, LEAVE BLANK OR MARK WITH AN X.**

<i>I have moved all my primary work materials in front of me and they are all within a 14 inch reach.</i>	
<i>I have removed/moved all items from my desktop that I am not actively using.</i>	
<i>I have removed/moved all items from under my desk, where I place my feet while seated at my computer.</i>	
<i>I have put my mouse and keyboard at the same level right next to one another on my desk or keyboard tray.</i>	
<i>I have moved frequently referenced manuals and binders to my desktop, within a natural reach. I understand when retrieving items from overhead bins I should stand up first, instead of hyperextending my arms in a seated position.</i>	
<i>When working or performing a task, I am aware I should not rest my arms on any sharp edges.</i>	
<i>I understand I should arrange all work materials on my desk within reach at the beginning of each workday and / or at the beginning of each task being performed.</i>	

➤ **CHAIR:**

Proper chair mechanics and simple adjustments to your chair can make all the difference. Familiarize yourself on what your chair can do. Adjustment options will vary from chair to chair. Make sure to keep your lower back supported and adjust your chair so that you can easily reach your keyboard and mouse. Familiarize yourself with the various adjustments your chair can make and make adjustments to meet your needs. For each of the recommendations below, please note with a ✓ (check mark) that you have performed or attempted the recommended adjustment. **IF YOU NEED ASSISTANCE OR ARE UNABLE TO PERFORM AN ADJUSTMENT, LEAVE BLANK OR MARK WITH AN X.**

<i>Adjust your seat height so that your feet are positioned flat on the floor or fully supported on a footrest. Your knees should be at the same height as your hips, at a 90-degree angle. Your thighs and hips should be parallel to the floor or angled slightly down.</i>	
<i>I have removed/moved all items from under my desk that may impede the positioning of my feet. I am able to pull myself all the way up to my desk without any interference.</i>	

Adjust your backrest in an upward/downward direction and find ideal support for your lower back. The lumbar support of your chair should be positioned to fit the curve of your lower back.	
Adjust your backrest backwards if you feel you are being pushed forward in your chair. Make sure that you maintain a distance of one to two inches (or two finger widths) between the front edge of the seat pan and the backside of your knees. Ideally you should be seated in your chair with ample back support with at least a two inch gap between your front edge of your chair and the back of your knees. Adjust your backrest forward if you are in a seated position with at least a two inch gap behind your knees and you do not have back support.	
Adjust your armrest so that they are only used while resting and not while typing or using your mouse.	
Adjust your seat to match your current practice. If keyboard is on the desk you may need a footrest. If you use your keyboard tray, adjust your keyboard tray to establish a neutral position.	

➤ MONITOR:

<p>The proper positioning of your monitor is essential in establishing a neutral body position. Your monitor should sit directly in front you, while typing. The height of your monitor is very important. You should not be looking downward or upward at the monitor face. The topmost edge line of your computer monitor should be slightly below your eye level, directly in front of you (between your shoulders). Relax, close your eyes, and look forward at your monitor. Where is the top of your screen? (CAUTION: Seek assistance, should you need to move your monitor.) For each of the recommendations below, please note with a ✓ (check mark) that you have performed or attempted the recommended adjustment. IF YOU NEED ASSISTANCE OR ARE UNABLE TO PERFORM AN ADJUSTMENT, LEAVE BLANK OR MARK WITH AN X.</p>	
I have adjusted my screen to sit directly in front of my keyboard. My monitor, keyboard and shoulders are in alignment.	
I have adjusted my screen so that the top 1/3 is at eye level. This will minimize neck strain and unnecessary movement while working.	
I have move/removed a light source or covered windows to remove glare and reflection on my computer monitor.	
I have placed my monitor at a comfortable distance for viewing. I understand that placing the monitor too far back might provoke me to sit on the edge of my seat to compensate for the distance.	
I have confirmed that my monitor is at a angle to my line of vision and not tipped too far upward or downward.	

➤ KEYBOARD AND MOUSE:

<p>The proper positioning and settings of keyboard and mouse are essential in establishing a neutral body position. Your keyboard and mouse should sit on the same surface, right next to one another. Your keyboard should not sit deep on your desk. Place your keyboard at the edge of your desk or keyboard tray. For each of the recommendations below, please note with a ✓ (check mark) that you have performed or attempted the recommended adjustment. IF YOU NEED ASSISTANCE OR ARE UNABLE TO PERFORM AN ADJUSTMENT, LEAVE BLANK OR MARK WITH AN X.</p>	
I have adjusted my keyboard and mouse to sit on the same surface and in close proximity of one another.	
I have adjusted my keyboard to sit at the edge of my desk or keyboard tray.	
I have adjusted my keyboard to sit right in front of my monitor.	
I have adjusted my keyboard so that my arms/wrist have no contact with any surface while typing – especially sharp edges.	
I have adjusted items around my mouse to ensure I have no obstructions that may impede movement of this device. i.e. adjusted chair arm rest, clutter on my desk.	
I have adjusted my keyboard/mouse height so that my elbows are at right angles (like squares) or slightly greater than (90 to 110 degrees) and my forearms form straight lines to my keyboard. Note: If your keyboard / mouse height is not adjustable, adjust your seat height so that your elbows are at right angles or slightly greater (90 to 110 degrees) and your forearms and hands form straight lines to your keyboard.	
I have placed my keyboard and mouse on my existing keyboard tray.	

➤ WORK PRACTICES:

Proper work practices are important in preventing and reducing your risk of developing a musculoskeletal
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disorder (MSD). For each of the recommendations below, please note with a ✓ (check mark) that you will /have observed the recommended adjustment. IF YOU NEED ASSISTANCE OR ARE UNABLE TO PERFORM AN ADJUSTMENT, LEAVE BLANK OR MARK WITH AN X.

I understand that I should not cradle my phone receiver between my head and shoulders. I should hold my phone in place.

I understand I should use a light touch and not press hard or pound on computer keys while typing.

I understand I should not pound with an open palm on my stapler or hole punch.

I understand I should place frequently referenced documents close to monitor to minimize neck movements.

I understand I should use a relaxed grip when manipulating my mouse.

I understand I should set up my work area at the beginning of every new task.

I understand I should not rest any part of my arms on any hard surfaces while typing.

I have read the Basic Ergonomic Guidelines handout.

I have completed this ergonomic self-assessment and I continue to have issues with the following components, as they pertain to my current workstation:

Chair Monitor Keyboard Footrest Mouse Phone Other

If other, explain here: _____

Please set up an ergonomic evaluation with me as soon as possible.

INFORMATION NEEDED TO COMPLETE YOUR REQUEST:

<i>My Desk is Located at:</i>	
<i>My Supervisors Name is:</i>	
<i>My Supervisors Phone is:</i>	
<i>My Regular Work Hours are:</i>	
<i>My Regular Work Days are:</i>	
<i>My Preferred time and day for an ergonomic evaluation:</i>	

NEXT STEPS:

Please take pictures of the following desk features with your smartphone and send them via mail to: Julie@R2wp.com. The following pictures are needed: Desk top; Monitor, Keyboard, Mouse, Phone, Chair, Bottom surface of desk; Area under desk where you rest your feet; and other areas of concern.

Upon completion of this form, please return via email noted above. Or I can be reached at: _____

If you do not get a response from my office within 72 hours please resubmit this paperwork via email and call me.

EMPLOYEE SIGNATURE:	DATE: