

Industrial/Operations Ergonomic Self-Assessment

Go through this checklist while in your daily workstation and check “Yes” or “No” for applicable sections. Any items checked “No” may need to be addressed and corrected according to the information provided in the Ergonomics Toolkit.

Please Note: By no means does this self-assessment substitute a medical diagnosis.

TOOLS	YES	NO
Are you trained on proper tool use?	<input type="checkbox"/>	<input type="checkbox"/>
Do you use the appropriate tool for each job?	<input type="checkbox"/>	<input type="checkbox"/>
Do you use tools only for their intended purpose?	<input type="checkbox"/>	<input type="checkbox"/>
Can you use tools in neutral hand and wrist positions?	<input type="checkbox"/>	<input type="checkbox"/>
Do tools fit comfortably in your hand without uncomfortable contact from sharp edges or finger grooves?	<input type="checkbox"/>	<input type="checkbox"/>
Can you use tools without exerting excessive force?	<input type="checkbox"/>	<input type="checkbox"/>
Are you capable of using tools without shoulder strain from the tool’s weight?	<input type="checkbox"/>	<input type="checkbox"/>
Do you only use tools that are free of defects, not damaged, and not excessively worn?	<input type="checkbox"/>	<input type="checkbox"/>
Are all your work surfaces clean and slip-resistant?	<input type="checkbox"/>	<input type="checkbox"/>
Is your work station set up to minimize reaching, bending, and other awkward postures?	<input type="checkbox"/>	<input type="checkbox"/>
Do you use appropriate personal protective equipment (PPE)?	<input type="checkbox"/>	<input type="checkbox"/>

Don’t see anything that applies to your workstation? Another self-assessment might be right for you:

- Office Ergonomic Self-Assessment
- Laboratory Ergonomic Self-Assessment

*If you are still experiencing discomfort two weeks after adjusting your workstation,
contact an ergonomics specialist at ergonomics@tamu.edu.

Resources:

Ergonomic Guidelines for Manual Material Handling [PDF]. (2007). California Department of Industrial Relations.

Ergonomics Guides & Checklists. (n.d.) Retrieved June 29, 2017, from <http://www.cpw.com/research/ergonomics-guides-checklists>

MATERIAL HANDLING	YES	NO
Are you trained in proper materials handling?		
Do you ask for help when lifting heavy loads?		
Do you avoid holding heavy loads for extended periods of time?	YES	NO
Do you alternate heavy-lifting tasks with tasks that involve lighter weight?		
Do you pause to recover periodically?		
Do you rotate tasks periodically throughout the day?		
Do you avoid tissue contact pressure from leaning against sharp edges?		
Do you handle objects that are easy to grip or have comfortable handles?	YES	NO
Do you lift items with a smooth and even motion?		
Do you avoid twisting, overreaching, jerking and bending?		
Is your workstation well-lit, ventilated and free of obstructions?		

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